

Rehabilitation following Ankle Osteotomy/Fracture – Mr Limaye

Week	Mobility	Weight bearing	Rehabilitation	Goals
0-2	Plaster Backslab	NWB	Pain and oedema control. Prophylactic/circulatory exercises (SQ, SLR, Static Gluts, ROM Knee/Hip). Advice re: elevation.	Prevent post op complications Independent on crutches. Maintenance of other muscle groups. Education
2-6	Below knee cast	NWB		
6-10 weeks	Air cast boot (day time only)	PWB progressing to FWB as pain allows	Pain and oedema control. Prophylactic/circulatory exercises. Active range of movement exercises. Early strengthening isometrics. Progressing to theraband. Early proprioception (heel raise and ball rolling in sitting). Foot intrinsics. Mobilise intermetatarsal and midtarsal.	Independent Mobility. Maintenance of other muscle groups.
10 weeks	Normal Shoe/trainer (Assess	FWB	Gait re-education. Resisted exercise. Commence closed chain exercises. Proprioception/weight transference/SLS Power walking on Treadmill Increase CV work – Cross trainer/Bike Single leg stand, progress proprioception,	Achieve full range of movement in all directions. Normal Gait pattern. Equal proprioception both sides Full strength

			out of base of support. Step ups, lunges (static to dynamic). Heel raises (double leg)	Return to full mobility and occupation.
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- No Impact/Plyometrics till 6/12.
- With all foot and ankle surgery swelling may persist for up to 1 year.