

Rehabilitation following Haglands excision/TA decompression – Mr Limaye

Week	Mobility	Weight bearing	Rehabilitation	Goals
0-2	Back slab	NWB	Prophylactic/circulatory exercises (SQ, SLR, Static Gluts, ROM Knee/Hip). Advice re: elevation.	Prevent post op complications Independent on crutches Education
2-6 *Commence physiotherapy	Air cast boot daytime only	PWB progress to FWB as pain and comfort allows.	Pain and oedema control. FROM active and passive - Ankle, mid foot and 1 st MTPJ. Commence TA stretches and early closed chain exercises - Squats, static lunge. Gait re-education. Early CV work – Bike (Unicam)	Independent Mobility. Maintenance of other muscle groups.
6 weeks	Normal Shoe/trainer	FWB	Gait re-education. Single leg stand, progress proprioception, out of base of support. Step ups, lunges (static to dynamic). Heel raises (double leg) Increase CV work – Cross Trainer, Stepper.	Achieve full range of movement in all directions. Normal Gait pattern. Equal proprioception both sides Full strength Return to full mobility and occupation.