



Orthopedic Surgery, Sports Medicine & Arthroscopy Specialists

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REHABILITATION PROTOCOL- Nonoperative ankle sprain

The rehabilitation guidelines are presented in a criterion based progression program. Individual patients will progress at different rates depending on their age, associated injuries, pre-injury health status, rehab compliance, tissue quality and injury severity. Specific time frames, restrictions, and precautions may also be given to protect healing tissues and the surgical repair/reconstruction. The therapist should consult the referring physician with any questions or concerns.

INDIVIDUAL CONSIDERATIONS

PHASE 1 (~0-1 weeks)

REHAB GOALS	<ol style="list-style-type: none"> 1. Minimize swelling & pain 2. Normalize gait
PRECAUTIONS	<ol style="list-style-type: none"> 1. RICE- Rest, ice, compression, elevation 2. Lace up brace
RANGE OF MOTION EXERCISES	<ul style="list-style-type: none"> ○ Soft tissue mobilizations/techniques as tolerated ○ Non wt bearing dorsiflexion stretch w/UE assist. Syndesmotic sprains- axial traction to hindfoot during stretch
SUGGESTED THERAPEUTIC EXERCISES	<ul style="list-style-type: none"> ○ As above ○ Core, contralateral LE & UE strengthening as tolerated ○ Inversion/eversion/DF/PF isometrics, progress to isotonic with elastic band ○ Balance/proprioception- seated wobble board, progress to standing ○ Wall sits, partial squats, hip & knee exercises as tolerated
CARDIOVASCULAR EXERCISE	Stationary bike, swimming (limit kicking)
PROGRESSION CRITERIA	<ul style="list-style-type: none"> ○ Symmetrical & pain free gait on even surface ○ Full active ROM ○ Full & symmetrical unilateral heel raise

PHASE 2 (Lateral- ~1-3 weeks, syndesmotic ~2-4 weeks)

REHAB GOALS	<ol style="list-style-type: none"> 1. Restore normal knee flexion 2. Minimize pain and swelling
PRECAUTIONS	<ol style="list-style-type: none"> 1. Lace-up/Velcro brace 2. Ice as needed after activity

RANGE OF MOTION EXERCISES	<ul style="list-style-type: none"> ○ Continue phase 1 exercises ○ Modalities as needed ○ Lateral sprains- standing calf stretches
SUGGESTED THERAPEUTIC EXERCISES	<ul style="list-style-type: none"> ○ Continue phase 1 exercises ○ Bilateral standing toe raises, ankle isotonic ○ Leg press, machine based hip/quad/hamstring strengthening, squats, lunges, lateral lunges, step ups ○ Balance/proprioception- progress to single leg, involve UE activities, perturbations, etc ○ Agility- light intensity ladders, start A/P, progress diagonal, lateral ○ Star excursion balance test ○ Plyometrics- pool jumping ○ Sport specific- fielding/catching/passing, ground based stick work
CARDIOVASCULAR EXERCISE	Continue phase 1 elliptical, treadmill walking, pool running
PROGRESSION CRITERIA	<ul style="list-style-type: none"> ○ Minimal/no effusion ○ Symmetric gait ○ No pain/instability

PHASE 3 (Lateral ~3-6 weeks, syndesmotic 4-6 weeks)

REHAB GOALS	<ul style="list-style-type: none"> ○ Progress strengthening ○ Minimize pain, inflammation
PRECAUTIONS	<ul style="list-style-type: none"> ○ Ice after activity
RANGE OF MOTION EXERCISES	<ul style="list-style-type: none"> ○ Continue exercises from phase 2. ○ Mobilizations/soft tissue technique as needed ○ Ankle stretching in closed chain
SUGGESTED THERAPEUTIC EXERCISES	<ul style="list-style-type: none"> ○ Continue exercises from phase 2 ○ LE strengthening- progress with weight/resistance ○ Balance/neuromuscular- Progress to unilateral, unstable, perturbations, etc ○ Agility- full speed ladders, cones, unilateral jumps to foam pad/BOSU ○ Plyometrics- box jumps, bounding, hurdle drills, split jumps, directional jumps ○ Sport specific- lateral slide board, skate sprints
CARDIOVASCULAR EXERCISE	Continue phase 2, start walk/run progression
PROGRESSION	<ul style="list-style-type: none"> ○ Pain free sprints

CRITERIA	<ul style="list-style-type: none"> ○ Unilateral hopping 90% ○ Full passive ROM
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PHASE 4 (~weeks 7+)

REHAB GOALS	<ul style="list-style-type: none"> ○ No pain with sport activities ○ Improvement of strength, endurance, neuromuscular control ○ Return to sport/work
PRECAUTIONS	<p>Post-activity soreness should resolve within 24 hours Avoid post activity swelling</p>
RANGE OF MOTION EXERCISES	<ul style="list-style-type: none"> ○ Continue with flexibility exercises from previous phase
SUGGESTED THERAPEUTIC EXERCISES	<ul style="list-style-type: none"> ○ Continue phase 3 activities. Progress with resistance/load. ○ Sport specific/agility- Increase speed/directional component as tolerated ○ Balance neuromuscular- continue to progress to single leg, unstable surface, dynamic activities etc
CARDIOVASCULAR EXERCISE	<p>Progress to baseline</p>
PROGRESSION CRITERIA- RETURN TO SPORT	<ul style="list-style-type: none"> ○ No pain or instability ○ Symmetrical ROM ○ Symmetric gait for sprints & agility ○ Unilateral hop/jump 90% contralateral ○ Completion of sport/work specific program ○ Physician clearance