Ankle Fracture Physical Therapy Protocol

Ankle Fracture Rehab Protocol

Phase I - Initial Stability (0 to 6 weeks)

- Weight bearing status is dependent on surgeon preferance / fixation strength Assume Non-weight-bearing (NWB) in cast or splint
- · Ambulatory device training (walker or crutches) and transfers.
- · General lower extremity strengthening SLR, quad sets, etc.

Phase II - Early Range of Motion/Gait training (6-8 weeks)

- · Patient is placed in a removable cast boot in orthopedics office (6 weeks).
- . Begin NWB ankle ROM exercises PF, DF, inversion, and eversion.
- Gradually increase weight-bearing (PWB) status so patient is full weight bearing WBAT) by the end of the 3th week.
- · Advance to cane
- · Advance with aggressive stretching program.
- . Isometric exercises for PF, DF, inversion and eversion
- · Seated towel toe crunches and push aways (intrinsic foot musculature)
- Stationary bike for range of motion.
- Ice for swelling. Minor swelling usually occurs as patient increases weightbearing status.

Phase IV - Return to Function (After 8 weeks)

- Theraband strengthening exercises DF, PF, inversion, eversion. Advance to home exercise program.
- · Mini squats, toe raises (bilateral and unilateral)
- · Advance daily stretching

Ankle fracture physical therapy protocol is a critical aspect of recovery for individuals who have suffered from an ankle fracture. Ankle fractures can significantly affect mobility and quality of life, making it essential to follow a structured rehabilitation protocol to restore function and strength. This article will outline the key components of an effective physical therapy protocol for ankle fractures, including phases of rehabilitation, goals, exercises, and precautions.

Understanding Ankle Fractures

Ankle fractures occur when one or more of the bones forming the ankle joint break. These fractures can result from various causes, including:

- Trauma from falls
- Sports injuries
- Accidents (such as car accidents)
- Overuse or stress fractures

Ankle fractures can be classified into several categories based on their severity and location, including:

- Stable fractures
- Unstable fractures
- Bi-malleolar fractures
- Tri-malleolar fractures

The specific type of fracture will influence the treatment approach, including whether surgical intervention is required.

Initial Treatment and Healing Phase

After an ankle fracture, the immediate focus is on healing the injury and managing pain. Initial treatment typically includes:

- 1. Rest: Avoid putting weight on the injured ankle.
- 2. Ice: Apply ice packs to reduce swelling and alleviate pain.
- 3. Compression: Use an elastic bandage or compression wrap to help minimize swelling.
- 4. Elevation: Keep the ankle elevated above heart level as much as possible to reduce swelling.

During this phase, a doctor may recommend immobilization with a cast or splint, depending on the type of fracture and its stability. The healing phase can last from 6 to 12 weeks, depending on the severity of the fracture.

Transitioning to Physical Therapy

Once the initial healing phase is complete and the healthcare provider has cleared the patient for physical therapy, a structured ankle fracture physical therapy protocol can

begin. This protocol is typically divided into several phases.

Phase 1: Range of Motion (ROM) Exercises

The goal of the first phase is to restore mobility and flexibility to the ankle joint. This phase generally begins 2 to 6 weeks post-injury, depending on the healing progress.

Exercises include:

- Ankle pumps: Move the foot up and down to encourage circulation.
- Toe curls: Scrunch a towel with the toes to improve flexibility and strength.
- Alphabet exercise: Use the big toe to "write" the alphabet in the air to promote joint mobility.

Precautions:

- Avoid pain during exercises; mild discomfort is acceptable.
- Use ice after exercises to reduce any swelling that may occur.

Phase 2: Strengthening Exercises

Once range of motion has improved, typically around 4 to 8 weeks post-injury, the focus shifts to strengthening the muscles around the ankle. This phase is crucial for regaining stability and preventing future injuries.

Strengthening exercises may include:

- Resistance band exercises: Use bands to perform dorsiflexion, plantarflexion, inversion, and eversion.
- Heel raises: Stand on the edge of a step and raise the heels to strengthen calf muscles.
- Balance exercises: Stand on one leg or use a balance board to improve proprioception.

Precautions:

- Gradually increase resistance and intensity.
- Ensure proper form to avoid compensatory movements that may lead to further injury.

Phase 3: Functional Training

Once adequate strength has been achieved, generally around 8 to 12 weeks post-injury, the focus shifts to functional training. This phase aims to prepare the individual for returning to daily activities and sports.

Functional exercises may include:

- Walking: Gradually increase walking distance and terrain difficulty.
- Agility drills: Incorporate lateral movements, such as side shuffles and carioca.
- Sport-specific drills: If applicable, practice movements relevant to the individual's sport or activity.

Precautions:

- Listen to the body and avoid pushing through pain.
- Consult with a physical therapist to ensure exercises are appropriate for the individual's level of recovery.

Additional Considerations in Ankle Fracture Rehabilitation

Individualized Approach

It is essential to recognize that every patient's recovery journey is unique. A personalized rehabilitation protocol should take into account:

- The type and severity of the fracture.
- The patient's age and overall health.
- Pre-existing conditions or previous injuries.

A physical therapist will design a tailored program that considers these factors and adjusts throughout the recovery process.

Pain Management

Effective pain management is crucial during rehabilitation. Patients may use:

- Over-the-counter pain medications (as advised by a healthcare provider).
- Ice therapy post-exercise.
- Modalities such as ultrasound or electrical stimulation, as recommended by a physical therapist.

Incorporating Lifestyle Modifications

In addition to physical therapy, incorporating lifestyle changes can aid in recovery and prevent future injuries. Consider:

- Maintaining a healthy weight to reduce stress on the ankle.
- Engaging in low-impact activities (e.g., swimming, cycling) to promote cardiovascular

health without stressing the joint.

- Practicing good footwear choices to provide proper support during activities.

Conclusion

Following an ankle fracture physical therapy protocol is vital for restoring function and strength to the ankle joint. The recovery process typically involves several phases: range of motion, strengthening, and functional training. Each phase builds upon the last, ensuring a comprehensive approach to rehabilitation. By adhering to a well-structured protocol and working closely with healthcare professionals, individuals can optimize their recovery and return to their daily activities with confidence. Always consult your healthcare provider before beginning any rehabilitation program to ensure safety and effectiveness tailored to your specific condition.

Frequently Asked Questions

What is the initial phase of physical therapy for an ankle fracture?

The initial phase typically involves reducing swelling and pain through rest, ice, compression, and elevation (RICE). Gentle range-of-motion exercises may begin once cleared by a healthcare provider.

How long does physical therapy usually last after an ankle fracture?

Physical therapy after an ankle fracture usually lasts from 6 to 12 weeks, depending on the severity of the fracture and the individual's recovery progress.

What types of exercises are included in the rehabilitation protocol for an ankle fracture?

Rehabilitation exercises may include range-of-motion exercises, strengthening exercises, balance training, and functional activities aimed at restoring mobility and stability.

When can a patient typically return to normal activities after an ankle fracture?

Patients can often return to normal activities within 8 to 12 weeks after an ankle fracture, but this can vary based on the fracture's severity and the effectiveness of the rehabilitation program.

What role does manual therapy play in ankle fracture

rehabilitation?

Manual therapy can play a significant role in ankle fracture rehabilitation by helping to improve mobility, reduce pain, and promote healing through techniques such as joint mobilization and soft tissue manipulation.

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