



These guidelines are intended for Compensation Services and Clinical Staff as general guides for the direction, timing and expected outcomes for post-surgical rehabilitation clients seen through the Visiting Specialists Clinic. Deviations from these guidelines may occur based on the specifics of individual cases and surgeon preference.

Procedure: Ankle Ligament Reconstruction

Phases and Expected Time Lines	Rehabilitation Guidelines	Goals of the phase	Notes
Week 1-2	<ul style="list-style-type: none"> NWB in boot sutures removed @ 10 days education: surgery, healing time, anatomy, rehab phases encourage ADL rest and elevation to control swelling control pain hip and knee AROM 	<ul style="list-style-type: none"> rest and recovery from surgery control swelling and pain increase ADL 	
Week 3-6	<ul style="list-style-type: none"> WB in walker boot at all times massage for swelling elevation to control swelling gentle AROM ankle PF/DF/eversion and toe flexion/extension stationary bicycle with boot core exercises <ul style="list-style-type: none"> abdominal recruitment bridging on ball ball reach arm pulleys or theraband using diagonal patterns hip: AROM <ul style="list-style-type: none"> strength: clam, sidelif, glut max, SLR knee: AROM <ul style="list-style-type: none"> strength: SLR, theraband press or leg machine stretching: glut max, glut med, piriformis rectus femoris, hamstrings 	<ul style="list-style-type: none"> allow healing while maintaining upper body, core, hip and knee strength and ROM 	
Week 7-10	<ul style="list-style-type: none"> trying to wean out of boot consider ankle bracing stationary bicycle AROM: <ul style="list-style-type: none"> begin inversion/eversion continue with ankle PF/DF, toe flex/extension continue with <ul style="list-style-type: none"> core exercises – progress to standing exercises hip strength exercises knee strength exercises manual mobilization to joints not part of ligament reconstruction 	<ul style="list-style-type: none"> WB in boot with pain and swelling controlled 	



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Ankle Ligament Reconstruction

Post-op Rehabilitation Guidelines

Phases and Expected Time Lines	Rehabilitation Guidelines	Goals of the phase	Notes
Week 11-12	<ul style="list-style-type: none"> • in regular shoe • control swelling +/- pain with elevation or modalities as required • AROM in WB • manual mobilization as required • muscle stimulation <ul style="list-style-type: none"> - intrinsic - invertors/evertors if required • gait training • continue strengthening core, hips and knees • proprioceptive training: single leg stance on even surface 	<ul style="list-style-type: none"> • full ROM 	
Week 13-16	<ul style="list-style-type: none"> • proprioceptive training <ul style="list-style-type: none"> - single leg stance on even surface with resistance to arms or WB leg - double leg stance on wobble board (wb), Sissel, fitter - single leg wb, Sissel, fitter with resistance to arms or NWB leg • strength <ul style="list-style-type: none"> - toe raises, lunges, squats - hopping, skipping, running @ 14+ weeks - manual mobilizations if required 	<ul style="list-style-type: none"> • full ROM in WB • good single leg balance • near full strength lower extremity 	
Week 16+	<ul style="list-style-type: none"> • continue to build endurance • work specific or activity specific training • plyometric training 	<ul style="list-style-type: none"> • full functional return to work +/- activity 	

Legend of Abbreviations:

ADL	activities of daily living
AROM	active range of motion
DF	dorsiflexion
FWB	full weight bearing
NWB	non weight bearing
PF	plantarflexion
ROM	range of motion
SLR	straight leg raise
WB	weight bearing

Developed by:

The post-operative rehabilitation guidelines are based on protocols identified from an extensive review of the current surgical and rehabilitation literature along with VSC and community orthopaedic surgeon, physical medicine specialist, and sports medicine physician input. The Orthopaedic Section of the BCMA has reviewed these guidelines during their development and has been helpful in that process. Representatives from the Physiotherapy Association of B.C. have also reviewed these guidelines.