



South Florida Institute of Sports Medicine™

Foot, Ankle & Leg Specialists of South Florida, Inc.

PODIATRY • ORTHOPEDICS • REHABILITATION

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Children's Foot, Ankle & Leg Deformities

Flat Feet in Adults & Children

Gait Disturbances

- In-toe
- Out-toe
- Toe Walkers

Fracture Care
Foot, Ankle & Leg

Total Ankle & Big Toe Joint Replacements

Reconstructive Foot, Ankle & Leg Surgery

Sports Injuries

Heel & Arch Pain

Arthroscopic Foot & Ankle Surgery

Achilles Tendon Treatments

- Ruptures
- Tendonitis

Bunion Correction

Hammertoe Correction

Ligament Injuries
Ankle & Lisfranc

Reconstructive Joint Surgery

Arthritis Surgery

Skin Surgery

Toenail Surgery

Diabetic Foot Care & Charcot Reconstruction

Nerve Injuries

- Neuromas
- Tarsal Tunnel
- Entrapments

Total Ankle Replacement Postoperative Protocol

These four phases of rehab will be instituted and can be performed on an outpatient basis.

- I. Phase I (0-2 weeks post-operative)
 - a. Immobilization in a short leg cast with assistive device i.e., crutches or rolling walker.
- II. Phase II (2-4 weeks post-operative)
 - a. Remain non weight-bearing while beginning active open kinetic chain movement.
 - b. Maintain in CAM Walker or posterior splint
 - c. Theraband
 - d. Concentrate on reducing equinus contracture.
 - e. Edema control.
- III. Phase III (4-8 weeks post-operative)
 - a. Begin protected weight bearing and continue to full weight bearing.
 - b. Avoid circumduction.
 - c. Edema control.
 - d. Open kinetic chain with transition to closed kinetic chain range of motion exercises.
- IV. Phase IV (8-12 weeks post-operative)
 - a. Gait training to full weight bearing.
 - b. Transition out of the CAM Boot.
 - c. Discontinue assistive devices as tolerated.
 - d. Proprioception exercises.
 - e. Active range of motion.
 - f. Progressive strength training.

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