

ACCELERATED REHABILITATION PROGRAM

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A Physiotherapist should lead you through your rehabilitation program after surgery. This table is a guide and changes may be required depending on your progress.

| Week | Exercises | Crutches | Footwear | Weight Bearing |
|------|---|----------|--|--|
| 0-2 | <p>Physio guided passive range of motion no more than neutral.</p> <p>Open chain strength exercises for quads, hamstrings, glutes hip flexors.</p> | Yes | Plaster Cast <u>or</u> CAMBOOT with 30mm heel lift <u>or</u> VACOPED (3) plus wedge sole. | Non-weight bearing. |
| 2-4 | <p>Begin physio guided active range of motion ankle exercises from week 3-4.</p> <p>Continue strength exercises as above including gentle closed chain quads, hamstrings, glutes.</p> <p>Can commence light isometric calf exercises at low resistance and reps, no stretching beyond 10° plantar flexion.</p> | Yes | <p>CAMBOOT with 30mm heel lift <u>or</u> VACOPED (3) plus wedge sole for 2nd week.</p> <p>CAMBOOT with 20mm heel lift <u>or</u> VACOPED (2) and wedge sole for 3rd week.</p> | <p>Touch weight bearing (10% body weight) initially building to partial weight bearing (50% BW) by 4th week.</p> |
| 4-6 | <p>Hydrotherapy may begin if wound healing is adequate.</p> <p>Gentle calf stretching with a towel (not body weight).</p> <p>Light concentric and eccentric calf raises with heel lift and progression to resisted ankle movements (not past plantar grade).</p> <p>Closed chain weight bearing quads, hamstrings, glutes, calf strengthening with physio guidance.</p> | Yes | <p>CAMBOOT with 10mm heel lift <u>or</u> VACOPED at (1) with flat sole for 4th week</p> <p>Transitioning towards plantar grade until boot is completely removed.</p> | <p>Partial weight bearing transitioning towards full weight bearing.</p> |

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| Week | Exercises | Crutches | Footwear | Weight Bearing |
|-------|---|----------|--|---|
| 6-8 | Hydrotherapy. Begin gait and ankle proprioception retraining. Moderate load close/open chain calf strengthening to plantar grade only. Continue hip and knee strengthening as necessary. | Yes | Yes CAMBOOT with no heel lift <u>or</u> VACOPED at (0) with flat sole. | Partial weight bearing transitioning towards full weight bearing. |
| 8-10 | Hydrotherapy, stationary cycling. Higher level proprioception training. Independent gait. | No | CAMBOOT with no heel lift <u>or</u> VACOPED at (0) with flat sole. | Full weight bearing. |
| 10-12 | Cont. high load ankle, knee, hip strengthening (can be performed independently). Low level calf plyometric exercises (fast CRs, tip toe walking). **No hopping, jumping, running. May begin walking, light jogging after 12 weeks, swimming, cycling. Can begin upper limb sports specific training eg. Shooting basketball, tennis shots from standing start, contralateral kicking small. | No | Regular footwear. | Full weight bearing. |
| 12-32 | Moderate load plyometrics at 12 weeks with supervision (double leg jumps, skipping). May begin sports specific training drills: if returning to contact sport only controlled outcome drills ie. No tackling, sudden unexpected change of direction, jumping without in air contact etc until cleared by surgeon and physio. Progression of calf stretching past plantar grade. | No | Regular footwear. | Full weight bearing. |

If you have any questions please do not hesitate to contact Mr Goldbloom's rooms on 0493 051 985.

The Accelerated Rehabilitation Program has been developed by Mr Goldbloom in conjunction with Physiotherapists, Brodie Leonard-Shannon and Brendan Mason from Back in Motion, Aspendale Gardens.

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