Phase I:

Weeks 0 – 3

**Goals:** Wound healing and edema control.

Weeks 0 - 1
1. Postoperative dressing care.
2. Elevation ankle/foot.
3. Crutches, nonweightbearing.

Weeks 1 – 2
1. Postoperative dressing replaced with rigid orthosis walking boot. (CAM walker or AIRCAST-type boot)
2. Postoperative walking boot with heel wedges (3 Wedges, 9/16 inch each).
3. Crutches, nonweightbearing.
4. Elevation.
5. Icing Cryo-cuff (Out of splint 3 x daily).

Weeks 2 – 3
1. Continue with Week 2 protocol, Begin AROM (PF, INV, EV, & Dorsiflexion to neutral only).

Phase II:

Weeks 3 - 12

**Goals:** Progress to full weightbearing, AROM to at least neutral, early strengthening (T-band “Progressive” PF, INV, EV, & Dorsiflexion to neutral only).

Weeks 3-5
1. One heel wedge removed from walking boot.
2. AROM (PF, INV, EV, & Dorsiflexion to neutral only).
3. Stationary Bike with walking boot.
4. Icing.

Weeks 6-8
1. Progress to full weightbearing with walking boot.
2. Remove remaining heel wedges in walking boot to neutral.
3. AROM (PF, INV, EV, & Dorsiflexion to neutral only).
4. Stationary Bike.
5. Icing.
Weeks 9-11
1. Stationary bike.
2. Stair climbing machine – light workout (Maintain Dorsiflexion at neutral).

Phase III:

Week 12

**Goal:** Discontinue walking boot.

1. One quarter inch to 3/8-inch heel lift in shoe.
2. Full ROM.
4. Heel lift in tennis/dress shoes.
5. Leg press for quadriceps strengthening.
6. Icing.

Phase IV:

Weeks 13-16
1. Discontinue heel lift.
2. Strengthening exercises; bilateral concentric heel raises, unilateral concentric toe raises.

Phase V:

Months 4 -6
1. Walk or jog progression.
2. Sport-specific agility skills.
3. Continue with strengthening exercises.
4. Swede-O brace application.
5. Functional progression – full return to activities.