DR. KAISEN YAO, MD

ORTHOPEDIC SPORTS MEDICINE SURGEON

Post-Operative Physical Therapy Protocol

Ankle Fracture Fixation

Northwell Health • Department of Orthopedic Surgery & Sports Medicine • Dr. Kaisen Yao, MD

Patient Name	Date of Surgery	Prescribing Surgeon
		Dr. Kaisen Yao, MD

General Guidelines & Precautions

- Follow surgeon-specific guidance on weight bearing — often non-weight bearing in a splint, cast, or boot for approximately 6 weeks until bony healing is confirmed, though this varies with fracture pattern and fixation stability.
- Prioritize swelling control with ice, compression, and elevation.
- Avoid forceful range of motion or weight bearing until cleared by follow-up imaging.
- Contact the surgeon for fever, excessive drainage, uncontrolled pain, or rapidly increasing swelling.

PHASE I
Protected Immobilization

TIMEFRAME
WEEKS 0–6

Goals:
Protect the fixation, control pain and swelling, and maintain hip/knee mobility.

Precautions:
Non-weight bearing (or as specifically directed) in a splint, cast, or boot; avoid ankle range of motion outside surgeon-approved limits.

Interventions:
Cryotherapy, compression, elevation, toe range of motion, and hip/knee strengthening that does not stress the ankle.

Criteria to Progress:
Radiographic evidence of healing per surgeon and pain controlled.

PHASE II

Progressive Weight Bearing & Motion

TIMEFRAME

WEEKS 6–10

Goals:
Progress to full weight bearing as cleared, and restore ankle range of motion.

Interventions:
Progressive weight bearing in the boot then out of the boot as directed, active and gentle passive ankle range of motion, gait training, and gentle calf/ankle strengthening.

Criteria to Progress:
Confirmed bony healing, full weight bearing, and improving range of motion.

PHASE III

Strengthening & Proprioception

TIMEFRAME

WEEKS 10–16

Goals:
Restore full strength, range of motion, and balance/proprioception.

Interventions:
Progressive resistance ankle and calf strengthening, single-leg balance and proprioception drills, stationary bike, and stair training.

Functional Focus:
Emphasize confident, symmetrical weight bearing and balance on uneven surfaces.

Criteria to Progress:
No reactive swelling, good single-leg balance, and strength approaching the uninvolved side.

PHASE IV

Return to Activity

TIMEFRAME

MONTHS 4–5+

Goals:
Restore full function for return to work, recreation, or sport.

Interventions:
Criterion-based walk-jog progression, agility drills, and sport-specific retraining as strength and confirmed healing allow.

Return to Sport/Work:
Return to running, cutting, or impact activity should follow surgeon and therapist clearance based on confirmed healing and strength testing.

Discharge Criteria:
Full pain-free range of motion, symmetrical strength and balance testing, and safe mechanics during advanced dynamic tasks.

This protocol is a general guideline. Because timelines depend heavily on fracture pattern and fixation stability, progression must be individualized by the treating physical therapist in coordination with Dr. Yao's office and confirmed against follow-up radiographs.