DR. KAISEN YAO, MD

ORTHOPEDIC SPORTS MEDICINE SURGEON

Post-Operative Physical Therapy Protocol

Ankle Ligament Repair (Brostrom)

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

- Immobilization in a boot or cast with limited or non-weight bearing is typical for the first 2–3 weeks to protect the repair.
- Avoid inversion (rolling the ankle inward) and aggressive stretching into inversion until cleared by the surgeon.
- Prioritize swelling control with ice, compression, and elevation.
- Contact the surgeon for fever, excessive drainage, uncontrolled pain, or rapidly increasing swelling.

PHASE I
Protected Immobilization

TIMEFRAME
WEEKS 0–3

Goals:
Protect the repair, control pain and swelling, and maintain toe and knee mobility.

Precautions:
Non- to limited weight bearing in a boot or cast as directed; avoid inversion and eversion stress on the ankle.

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

Criteria to Progress:
Incision healing well and pain controlled.

PHASE II

Progressive Weight Bearing & Motion

TIMEFRAME

WEEKS 3–6

Goals:
Progress to full weight bearing in the boot, begin protected range of motion, and wean out of the boot as cleared.

Interventions:
Active ankle range of motion avoiding inversion, gentle calf and ankle strengthening, stationary bike, and gait training.

Precautions:
Continue to avoid forceful inversion stretching.

Criteria to Progress:
Full weight bearing, improving range of motion, and minimal pain.

PHASE III

Strengthening & Proprioception

TIMEFRAME

WEEKS 6–12

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

Interventions:
Progressive resistance ankle strengthening (all planes as cleared), single-leg balance and proprioception drills, wobble board/balance board training, and gait 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 Running, Agility & Sport

TIMEFRAME

3–6 MONTHS

Goals:
Safely progress running, cutting, and sport-specific movement with confident ankle stability.

Interventions:
Criterion-based walk-jog progression, agility and cutting drills, plyometrics, and sport-specific retraining, often with ankle taping or bracing initially.

Return to Sport/Work:
Return to cutting or pivoting sports should follow surgeon and therapist clearance based on strength, balance, and confidence 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. Progression should be individualized by the treating physical therapist in coordination with Dr. Yao's office based on ligament quality and repair technique.