

Jeffrey B. Witty, M.D.
Orthopaedic Surgery and Sports Medicine
Acadiana Orthopaedic Center at Lafayette General
4212 W. Congress Street
Suite 1600
Lafayette, LA 70506
Phone: (337) 216 - 9018
Fax: (337) 216 - 9143



Ankle Sprain Recovery and Rehabilitation Protocol:

***NOTE: Depending on the severity of your injury, you may be placed into a boot, brace, or similar type of supportive device for a brief period of time to help resolve the initial pain from the injury. You may remove this to perform the icing protocol listed under the “Acute Phase”.

Acute Phase (Typically start immediately or within a few days of injury and lasts up to one week after injury):

Begin icing protocol:

- There is more than one way to do this:
 - o Plastics bags mixed with ice and water
 - Keep thin towel between ice bag and skin
 - o Special icing cuffs for ankle
- Ice ankle for 10 minutes
- Remove ice and wrap ankle with compression stocking or ACE for 10 minutes
- Remove compression stocking or ACE and ice ankle for another minutes.
- This may be done as much as comfort allows, but try to perform at least once every two hours for the first few days.

Begin ankle mobility exercises: See website for video.

**Perform these exercises at least once a day, but it is ok to do as more often if tolerated well.

- 1) Ankle circles/circumduction
 - a. Rotate ankle clockwise 30 reps x 3 sets
 - b. Rotate ankle counterclockwise 30 reps x 3 sets

Jeffrey B. Witty, M.D.
Orthopaedic Surgery and Sports Medicine
Acadiana Orthopaedic Center at Lafayette General
4212 W. Congress Street
Suite 1600
Lafayette, LA 70506
Phone: (337) 216 - 9018
Fax: (337) 216 - 9143



Jeffrey B. Witty, M.D.
Orthopaedic Surgery and Sports Medicine
Acadiana Orthopaedic Center at Lafayette General
4212 W. Congress Street
Suite 1600
Lafayette, LA 70506
Phone: (337) 216 - 9018
Fax: (337) 216 - 9143



2) Calf stretches

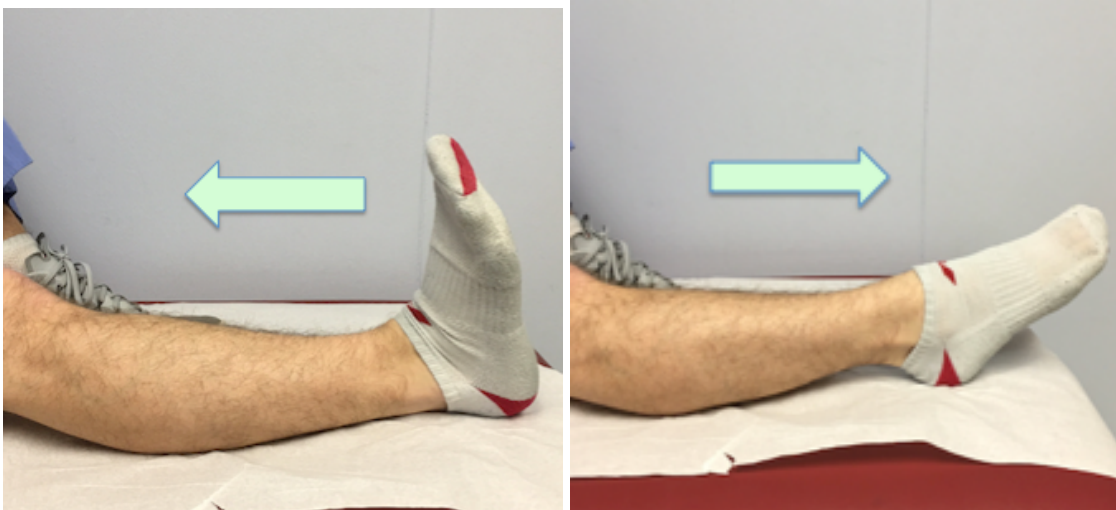
- a. Perform in seated position, not standing.
- b. Use towel or sheet to pull back on foot and stretch ankle
- c. Hold for 30 seconds
- d. Perform 5 reps



Jeffrey B. Witty, M.D.
Orthopaedic Surgery and Sports Medicine
Acadiana Orthopaedic Center at Lafayette General
4212 W. Congress Street
Suite 1600
Lafayette, LA 70506
Phone: (337) 216 - 9018
Fax: (337) 216 - 9143



- 3) Active ankle plantar and dorsiflexion
 - a. Move your ankle and toes away from your head as far as possible and hold in this position for 5 seconds
 - b. Pull your ankle and toes back toward your head and hold in this position for 5 seconds
 - c. Perform 20 reps



Jeffrey B. Witty, M.D.
Orthopaedic Surgery and Sports Medicine
Acadiana Orthopaedic Center at Lafayette General
4212 W. Congress Street
Suite 1600
Lafayette, LA 70506
Phone: (337) 216 - 9018
Fax: (337) 216 - 9143



Second Phase:

**** Once pain level allows, begin the following exercises. It is ok to start these even within a few days of injury if the pain level allows)**

**** See website for video:**

- 1) Static isometric muscle strengthening
 - a. Using the motions listed below push your injured foot against a stationary object so that the foot actually does not move but your muscles contract.
 - b. Hold each for 10 seconds and do 5 reps
 - c. Perform at least once a day and up to 3 times a day
 - i. Eversion (foot moves outward)



Jeffrey B. Witty, M.D.
Orthopaedic Surgery and Sports Medicine
Acadiana Orthopaedic Center at Lafayette General
4212 W. Congress Street
Suite 1600
Lafayette, LA 70506
Phone: (337) 216 - 9018
Fax: (337) 216 - 9143



ii. Inversion (foot moves inward)



iii. Plantar flexion (toes point away from your head)



Jeffrey B. Witty, M.D.
Orthopaedic Surgery and Sports Medicine
Acadiana Orthopaedic Center at Lafayette General
4212 W. Congress Street
Suite 1600
Lafayette, LA 70506
Phone: (337) 216 - 9018
Fax: (337) 216 - 9143



iv. Dorsiflexion (toes point toward your head)



- 2) Theraband muscle strengthening
- a. Do not start unless the isometric exercises (see above) are well tolerated.
 - b. Using the motions listed below, use the provided resistance bands to begin rehabbing your ankle
 - c. Hold each for 5 seconds and do 10 reps
 - d. Perform at least once a day and up to 3 times a day

Jeffrey B. Witty, M.D.
Orthopaedic Surgery and Sports Medicine
Acadiana Orthopaedic Center at Lafayette General
4212 W. Congress Street
Suite 1600
Lafayette, LA 70506
Phone: (337) 216 - 9018
Fax: (337) 216 - 9143



i. Eversion (foot moves outward)



ii. Inversion (foot moves inward)



Jeffrey B. Witty, M.D.
Orthopaedic Surgery and Sports Medicine
Acadiana Orthopaedic Center at Lafayette General
4212 W. Congress Street
Suite 1600
Lafayette, LA 70506
Phone: (337) 216 - 9018
Fax: (337) 216 - 9143



iii. Plantar flexion (toes point away from your head). Start with the band and as pain improves, progress to exercise on step with two legs and then progress to single leg.



Jeffrey B. Witty, M.D.
Orthopaedic Surgery and Sports Medicine
Acadiana Orthopaedic Center at Lafayette General
4212 W. Congress Street
Suite 1600
Lafayette, LA 70506
Phone: (337) 216 - 9018
Fax: (337) 216 - 9143



iv. Dorsiflexion (toes point toward your head)



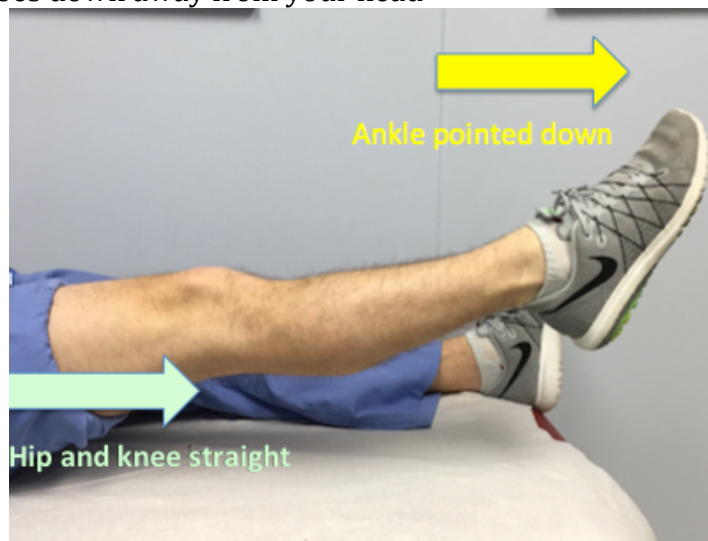
3) Functional movement patterns

a. Lower limb triple flexion/extension

- i. While lying on your back, pull the injured extremity's hip up toward your stomach while simultaneously bending your knee and pulling your toes toward your head



- ii. Reverse the motion by straightening your hip, knee, and point your toes down away from your head



1.

- b. Perform thirty reps 1 – 3 times a day

Jeffrey B. Witty, M.D.
Orthopaedic Surgery and Sports Medicine
Acadiana Orthopaedic Center at Lafayette General
4212 W. Congress Street
Suite 1600
Lafayette, LA 70506
Phone: (337) 216 - 9018
Fax: (337) 216 - 9143



Third Phase:

****At this point it may be determined that working with a therapist will facilitate a patient's return to full sports or activities.**

- Continue progressive ankle strengthening, neuromuscular and proprioceptive training
- Start sport specific functional exercises
- Return to play criteria (Single Leg Hop, Balance testing), goal of injured limb to be at least 80% opposite side.
- Use of prophylactic ankle support during activity/practice/competition

Adapted from:

Bleakley et al. BMJ 2010

Bleakley et al. BMJ 2006

Kaminski et al. Journal of Athletic Training 2013