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Aaron S Covey MD MBA Rania R. Rifaey MD Edward S. Gensicki DPM Megan R. Wolf MD COMPREHENSIVE PHYSICAL THERAPY

Raymond Ryan PT/Director

Valerie Peckingham PT

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Megan R. Wolf, MD Sports Medicine/Foot & Ankle

Lisfranc Open Reduction Internal Fixation

Post-Operative Protocol

Phase I - Maximum Protection

Weeks 0-2

- Post-operative splint
- Non-weight bearing at all times with use of crutches

 No scooter

Goals

- Reduce inflammation and pain
- Protect surgical repair
- Maintain strength and range of motion of non-operative joints
- Exercise progression
- Open chain hip strengthening
- o Gait training
- o Elevation and ice to assist with swelling reduction

Weeks 2 to 6:

- Transition to CAM boot
 - Non-weight bearing with use of crutches or scooter pending MD approval <u>Goals</u>
 - o Reduce inflammation and pain
 - Protect surgical repair
 - o Maintain strength in contralateral limb and unaffected joints
 - Exercise progression
 - o Elevation and ice to assist with swelling reduction

Phase II- Early Stretching and Strengthening

Weeks 6 to 12:

- Gradual progression of weight bearing while in CAM boot
- Initiate range of motion at foot and ankle
- Initiate closed chain strengthening consistent with weight bearing status
 - <u>Goals</u>
 - Reduce inflammation and pain
 - Protect surgical repair
 - Weight bearing progression while in CAM boot
 - Week 6: 25% weight bearing
 - Week 7: 50% weight bearing
 - Week 8: weight bearing as tolerated progressing to full weight bearing
 - Initiate strengthening at foot and ankle

Exercise progression

- o Normalize gait pattern
- Introduce bike or NuStep
- o Bilateral and unilateral closed kinetic chain strengthening program consistent with weight bearing status
- Isometric ankle/foot strengthening once full weight bearing
- o Intrinsic foot strengthening
- o Modalities for pain relief and swelling reduction

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Phase III- Progressive Stretching and Strengthening

Weeks 12 to 18:

- Discontinue CAM boot and transition to shoe with full length carbon fiber insert
- Weight bearing as tolerated
- Progress closed chain strengthening
- Initiate balance/proprioceptive drills

Goals

- No swelling
- Weight bearing progression
 - Weeks 12 and 13: transition out of CAM boot for household ambulation and PT only
 - Week 14: transition out of CAM boot at all times
- Full range of motion
- Normal gait pattern
- Progress single limb strength

Exercise progression

- o Gait training- normalize gait pattern
- Proprioception/balance drills
- o Unilateral closed kinetic chain strengthening program
- Bike and elliptical trainer

Phase IV- Advanced Strengthening and Running Progression

Weeks 18-22:

- Shoe with full length carbon fiber insert
- Administer Preliminary functional test at 18 weeks for physical therapist to review
- Initiate straight line jogging at 18 weeks if proper biomechanics are demonstrated and symmetry on functional test
- Advance strengthening program
- Initiate plyometrics progressing from double limb to single limb
- Potential removal of hardware by MD at 20 weeks if dictated by swelling/pain
- Administer Return To Sport functional test at 24-26 weeks prior to MD appointment for physician to review Goals
 - No swelling
 - Full range of motion
 - Symmetrical strength and power
 - Exercise progression
 - Basic ladder series
 - Linear jogging progression
 - Basic plyometric box progression
 - Gym strengthening progression

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Criteria to be released for return to sport

• Follow-up examination with the physician

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- Pass Return To Sport functional test at >90% (involved vs. uninvolved limb)
- Display symmetry and confidence in high-speed cutting, multi-plane plyometric drills, sprinting and decelerating

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Anticipated return to sport:

• 26 weeks for contact and non-contact athletes

Revised ***

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