

Ryan S. Charette MD Adam Q Ferguson DO Jon Dale PA-C Christa Beyer PA-C

Melinda Amato OTR/L CHT

Brandon Heyda OTR/CHT

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

Isabella Mesturini PT,DPT

Jon C Driscoll MD Hudson H. Seidel MD Robert C. Stockton DO

Peter Ives PTA Kirsten Perillo PTA



## 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

714 South Main Street Cheshire, CT 06410



Ryan S. Charette MD Adam Q Ferguson DO Jon Dale PA-C Christa Beyer PA-C

Melinda Amato OTR/L CHT

Brandon Heyda OTR/CHT

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

Isabella Mesturini PT,DPT

Jon C Driscoll MD Hudson H. Seidel MD Robert C. Stockton DO

Peter Ives PTA Kirsten Perillo PTA



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

## Lisfranc Open Reduction Internal Fixation

**Post-Operative Protocol** 

## 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

455 Lewis Avenue, Suite 101



Ryan S. Charette MD Adam Q Ferguson DO Jon Dale PA-C Christa Beyer PA-C Aaron S Covey MD MBA Rania R. Rifaey MD Edward S. Gensicki DPM Megan R. Wolf MD COMPREHENSIVE PHYSICAL THERAPY Jon C Driscoll MD Hudson H. Seidel MD Robert C. Stockton DO

Peter Ives PTA Kirsten Perillo PTA



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

## Lisfranc Open Reduction Internal Fixation

**Post-Operative Protocol** 

Criteria to be released for return to sport

• Follow-up examination with the physician

Melinda Amato OTR/L CHT

Brandon Heyda OTR/CHT

- 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

Raymond Ryan PT/Director

Valerie Peckingham PT

Isabella Mesturini PT,DPT

## Anticipated return to sport:

• 26 weeks for contact and non-contact athletes

Revised \*\*\*

863 N. Main St. Ext., Suite 200 Wallingford, CT 06492

00 455 Lewis Avenue, Suite 101 Meriden, CT 06451 98 Main Street, Suite 201 Southington, CT 06489 714 South Main Street Cheshire. CT 06410