

COMPREHENSIVE PHYSICAL THERAPY

Melinda Amato OTR/L, CHT
Brandon Heyda OTR/CHT

Raymond Ryan PT/Director
Valerie Peckingham PT
Isabella Mesturini PT, DPT

Peter Ives PTA
Kirsten Perillo PTA

Megan R. Wolf, MD

Sports Medicine/Foot & Ankle

Peroneal Tendon Repair/Groove Deepening Post-Operative Protocol

Weeks 0-2

- Non-weight bearing in plaster splint
- Crutches only, no scooter use
- Elevation, “toes over nose” for pain and swelling control

Weeks 2-4

- Transition into boot
- Begin progressive weight bearing
 - Week two at 25% of weight, use two crutches
 - Week three at 50% of weight, may transition to one crutch
 - Week four may transition to full weight bearing in boot
- Being ankle ROM only
 - AROM dorsiflexion
 - Only 75% of plantar flexion (avoid full plantar flexion)
 - Avoid passive inversion and eversion
 - No resistance
- Begin ankle-strengthening exercises
 - Isometrics all directions-submaximal
 - No resistance bands
- Intrinsic foot strengthening

Weeks 4-8

- At week 6, wean from boot and transition into velocity ankle brace
 - Over 10-14 days, may discontinue wearing boot at home. Continue to wear the boot outside of the home.
 - After 14 days, completely discontinue boot (8-week mark)
 - Must wear velocity brace for 6 weeks
- May sleep without boot at 6 weeks
- Progressive strengthening and ROM
- Proprioception training
 - Stable surfaces progressing to varied surfaces as strength and neuromuscular control allows

Weeks 8-12

- Complete preliminary functional test prior to 8 week follow up with physician
- Progress to higher impact activity with velocity brace
 - Begin straight line jogging
 - Plyometrics and jump training
- Sport specific training at 12 weeks
- May discontinue velocity brace at 12 weeks
- Complete full functional test at 16 weeks

Revised ***