

BROSTROM INTERNAL BRACE PROTOCOL

POST OPERATIVE

	Time Frame (Weeks)	Activity
PHASE I	0-2	WB Status: NWB Device: Splint, neutral ankle ROM: No ROM
	2-4	WB Status: PWB to FWBAT; weaning off crutches Device: Cast or walking boot, neutral ankle ROM: No ROM Manual Therapy: Gentle soft tissue mobilization (STM) to reduce edema Exercises: OKC proximal PREs Light stationary bike in cast or boot
PHASE II	4-6	WB Status: WBAT Device: Wean boot to tennis shoe and lace up ASO brace ROM: AROM and gentle AAROM into PF, DF, and eversion - NO INVERSION Manual Therapy: Gentle STM to surrounding mm, and to reduce edema Midfoot, forefoot, and first ray mobilization Strength: Foot intrinsic activation, DF/PF with therabands through painfree ROM Exercises: Continue OKC and CKC PREs, begin heel raises, proprioception, stationary bike in tennis shoes
	6-8	WB Status: FWB in lace up ASO brace with all ADLs Device: Lace up ASO brace ROM: Continue PROM and A/AROM as symptoms allow - NO INVERSION Manual Therapy: Early scar mobilization, progressive STM Continue joint mobilization, include TCJ as appropriate Strength: Begin eversion/inversion isometrics Exercises: CKC LE strengthening, heel raise progression, Controlled Movement Series Proprioception - SL balance Stationary bike in tennis shoes, elliptical, walking program
PHASE III	8-12	Device: Lace up ASO brace for all ADLs ROM: Limit INVERSION to 10 degrees, at 12 weeks inversion to tolerance Manual Therapy: Continue STM, and scar mobilization as needed Strength: Isotonics through pain free ROM - DF, PF, eversion; inversion isometrics Exercises: Proprioception, plantarflexion eccentrics, eversion concentrics/eccentrics, heel raise progressions OKC/CKC strength progressions Low amplitude plyometrics, ladder drills with brace on Cardio- bike, elliptical, stair master, walking program
	12-16	Device: Lace up ASO brace as needed ROM: Restore normal A/PROM all planes Strength: Progressive PREs as tolerated, all planes Exercises: Plyometric progressions, bilateral progressing to unilateral Linear running walk/jog program Submax sport progressions-cutting, pivoting, change of direction, acceleration/ deceleration
		Testing criteria to begin running, and for advancing into PHASE IV <ul style="list-style-type: none"> • Dynamometer testing: ≥90% of uninvolved side • Knee to wall: ≥90% of uninvolved side • Y-Balance: within 4cm or ≥94% of uninvolved side • Heel Raise Height: ≥90% of uninvolved side • Heel Raise to Fatigue: ≥90% 1RM height on each repetition; ≥90% to uninvolved side
PHASE IV	16+	Strength: Advanced strength and proprioception Exercises: Effort and intensity progression with running, jumping, and plyometric progressions, cutting, pivoting, change of direction, acceleration/deceleration RTS: RTS testing .shcanklerts Functional Movement Screening High impact and advanced sport progressions when functionally appropriate and cleared by MD/PT