COMPARTMENT RELEASE PROTOCOL

Day 1-13 Post-op

- PT removes bandages on POD #4, keep steri-strips intact until Dr Babb can remove them.
- No ointments, betadine etc should be used on the incisions or portals.
- If any drainage/oozing is present recover with 4x4’s, and notify Dr Babb (may need antibiotics).
- NO ice bags on any oozing or open wounds without being covered first with a bandage.
- If any wounds are oozing delay range of motion until wounds are closed and healed.
- NO water on wounds for 2 weeks (including showers) even if covered, no submersion of wounds in water (baths) until wounds are scars.
- Ambulation:
  - Unilateral Release: NWB one week
  - Bilateral Release: 2 crutches for first week and then gradually discontinue crutches in second week.
- ROM:
  - PROM/AROM of ankle & knee
  - NO STRETCHING OR ISOMETRICS
- Isolated anterior compartment fasciotomies have the quickest rehabilitation and my resume running within 6-8 weeks post-op. Pt.'s who had deep posterior compartment release or 4-compartment release usually require at least 12 weeks of rehabilitation before running is permitted.

Day 14- 20 Post-op (once sutures removed)

- ROM:
  - Triceps surae stretch
  - Talocrural and subtalar joint mobilizations as needed
- Strengthening:
  - Ankle 4 way isometrics & isotonics
  - Toe curls
  - General LE strengthening in OKC and gradually progressing to CKC as tolerated
- Balance/Proprioception:
- Aerobic conditioning
  - Stationary bike
Day 21- 34 Post-op

- **ROM:** Progress toward full ROM as tolerated
- **Strengthening:** Progress LE strengthening as tolerated
- **Balance/Proprioception:** Progress as tolerated
- **Aerobic conditioning**
  - Continue Stationary bike
  - No running or jogging

Day 35- 8 weeks Post-op

- **ROM:** Full
- **Strengthening:**
  - Progress ankle and toe isotonics with gradual increase in resistance
  - Progress OKC/CKC activities
    - Squats
    - Lunges
    - Step ups
    - Step downs
- **Balance/Proprioception**
  - Progress balance activities
    - SLB with increased hold times
    - SLB with light perturbations
- **Aerobic conditioning**
  - Continue Stationary bike
  - No running or jogging depending on compartments released

8-12 Weeks Post-op

- **Strengthening:** Progress OKC & CKC LE strengthening in preparation for in-line jogging
- **Aerobic conditioning**
  - Continue Stationary bike
  - Elliptical

3 Months Post-op

- **Strengthening:**
  - Continue progressing previous strengthening activities
- **Straight ahead running**
  - Start with 100 yds at half speed on soft level surface
  - Add 100 yds every other day
  - Work up to 1 mile or 1760 yds
- **Gentle lateral movements:**
  - Defensive slide
  - Floor ladder
- Figure 8’s
- Carioca’s

- **Transverse plane movements:**
  - Pivots
  - Steps with rotation

- **Low level plyometrics:** stationary jumps, hops, skipping rope. Refer also to MAO plyometric program

- May progress back to sports once cleared by Dr. Babb

Patient progression during the time frames along with general modality and exercise choice is left up to the discretion of the treating therapist. If you have any questions regarding this protocol, please contact (316) 440-1100.