



ROSENBERG COOLEY METCALF  
THE ORTHOPEDIC CLINIC AT PARK CITY

**Charles C. Lind, MD**  
**Lateral Ankle Sprain Grade III**  
**Non-Operative Protocol**

**Phase I- Maximum Protection (Weeks 0 to 4 as directed by the physician):**

- Ice and modalities to reduce pain and inflammation
- Compression wrap to reduce swelling
- Crutches, splint, boot or cast as instructed
- Elevate the ankle above the heart
- Active range of motion PF/DF gentle inversion/eversion as instructed
- Stationary bike and pool program

**Phase II- Progressive Range of Motion and Early Strengthening (Weeks 4-6):**

- Continue with modalities to reduce swelling and control pain
- Wean off crutches as instructed
- Normalize gait mechanics
- Continue with splint or boot as instructed
- Full active range of motion – emphasize end range dorsiflexion
- 4 plane ankle TB – emphasize eversion strengthening
- Foot intrinsic strengthening
- Begin closed chain progression bilateral progressing to unilateral (squats, calf raises, toe raises)
- Proprioception drills
- Bike, elliptical, treadmill walking
- May begin shallow water pool jogging

**Phase III- Progressive Strengthening (Weeks 6 – 8):**

- Continue with modalities to reduce swelling
- Restore full range of motion all planes
- Open and closed chain ankle and foot intrinsic strengthening
- Progress difficulty of proprioception drills
- Increase intensity of pool running progression to dry land and lateral agilities as tolerated

**Phase IV- Advanced Strengthening – Return to Sports (Weeks 8-12):**

- Progress strengthening and proprioception
- Advance to sprinting and agility drills as tolerated; braced or tape.
- Return to sport activity with field or court drills
- Must demonstrate a negative clinical exam and pass a strength and agility test with greater than 90% efficiency for physician release.