



Bimalleolar / Trimalleolar Ankle Fracture ORIF Protocol

This rehabilitation protocol outlines post-operative management following Open Reduction and Internal Fixation (ORIF) of bimalleolar or trimalleolar ankle fractures. Progression is time- and criterion-based and should be individualized based on fixation stability and radiographic healing.

Phase I: Protection Phase (0–6 Weeks)

- Non-weight bearing in cast or boot.
- No ankle motion.
- Elevate to reduce swelling.
- Cryotherapy and edema control.
- ROM of toes, knee, and hip.
- Core and glute strengthening.
- Education on safe transfers and crutch use.

Phase II: Progressive Weight Bearing (6–10 Weeks)

- Transition from partial to full weight bearing in boot per surgeon clearance.
- No resisted ankle strengthening.
- Avoid impact activities.
- PROM fiAAROM ankle dorsiflexion, plantarflexion, inversion, eversion (gentle).
- Continue hip/knee/core strengthening.
- Balance training in boot.
- Gait training with assistive device.

Phase III: Functional Restoration (10–14 Weeks)

- Restore functional ankle ROM in all planes.
- Theraband resistance strengthening.
- Closed-chain strengthening (mini squats, step-ups).
- Balance and proprioceptive training.
- Avoid high-impact or twisting motions.
- No running or jumping.



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Phase IV: Advanced Strength & Endurance (3–6 Months)

- Progressive resistance strengthening (bands, weights).
- Functional strengthening (lunges, heel raises).
- Treadmill walking, elliptical, pool exercises.
- Advance proprioceptive drills (single-leg stance, wobble board).
- Avoid contact sports until cleared.

Phase V: Return to Sport/Work (6+ Months)

- Surgeon clearance required before impact sports.
- Plyometric training progression.
- Agility ladder, cutting, pivoting drills.
- Sport- or job-specific training.
- Long-term conditioning and maintenance.