



R PEPPER MURRAY, MD

JOHN C EDWARDS, MD

ERIC C JOHNSTON, MD

STEVEN B HUIISH, MD

JOSHUA M HICKMAN, MD

MICHAEL M HESS, MD

DAVID W STEVENS, MD

JARED J TYSON, MD

CLINT J WOOTEN, MD

Posterior Tibial Tendon Reconstruction Rehabilitation Protocol

Weight Bearing

- Patient to receive training one week before surgery.
- Strict non-weight bearing for 6 weeks after surgery.
- Advance to weight bearing 25% per week thereafter in boot.
- Unrestricted weight bearing after 12 weeks if radiographic union.

Brace Use

- Week 1-6: Complete immobilization in boot or cast.
- Week 7-12: In boot with orthotic when out of bed.
- Week 12-24: ASO lace up brace with **medial strap snug!** Orthotic in shoe.
- Orthotic in all shoes (custom or over-the-counter semi-rigid).

Physical Therapy

- Begins after 6 weeks of immobilization.

Modalities

- As needed to improve edema and pain control first 2 weeks in therapy. Cryotherapy after sessions.

Range of Motion

- Active only, first 2 weeks of therapy.
- Passive stretch thereafter if not progressing.
- Must get dorsiflexion and inversion.

Strength

- Isometrics first week of therapy.
- Progress from closed chain to open chain as pain and motion permit.
- Goal: Plantar Flexion and inversion strength with one-legged stance.

Proprioception

- Progress as tolerated. Recommend brace for all proprioception training.
- Goal: One-legged balance with eyes closed for 20 seconds.

Home Exercise Program

- Transition over to home program when appropriate.

NOTE: This reconstruction often includes bone healing from osteotomies. Beware of increased swelling and pain which may indicate incompletely healed bone. Reduce weight bearing and therapy demands as indicated

Updated 10/2016