

Haglund's Deformity Excision Rehab Protocol

Phase	Weightbearing	Brace	Goals	Therapeutic Interventions
Phase 1 0-2 weeks	NWB 0-2 weeks (crutches, walker or knee-walker)	Splint	Control swelling and pain.	Hip and Knee ROM in supine and standing. Quad sets, heel slides, standing hamstring curl, supine hip ABD, standing hip EXT/ABD, seated hamstring stretch.
Phase 2 2-4 weeks	NWB in boot with removable heel wedges	At 2 weeks begin walking boot; Remove heel wedge after 1 week until flat foot in boot	Improve core, hip, and knee strength.	Light massage and elevation of foot to minimize edema. Ankle AROM/PROM, gentle resistance band strengthening with dorsiflexion limited to first point or resistance, NO calf stretching/dorsiflexion past neutral
Phase 3 4-6 weeks	WBAT in boot		Control swelling with elevation, massage, and modalities.	Control swelling with elevation, massage, and modalities. AROM at ankle: PF (plantar flexion), inversion/eversion, DF PROM. Grade 1-2 mobilizations of subtalar joint. Mobilizations to foot as needed, monitor patient for knee hyperextension, NO calf stretching/dorsiflexion past neutral
Phase 4 6-12 weeks	WBAT out of boot	Begin weaning boot and into supportive shoe	Increase DF and strength.	Stationary bike- start to add tension, Sitting: active PF exercises, DF to tolerance, NO calf stretching (*unless specified by surgeon)
Phase 5 13-16 weeks	FWB	None	Full weightbearing, pain and swelling is resolved. Good SL proprioception.	Theraband: Inversion, Eversion, and DF. Gentle calf stretching, calf raise, leg press, Mobilizations as needed, SLS, Balance activities, eccentric drops, and gait retraining; *begin calf stretching/dorsiflexion past neutral after 12 weeks
Phase 6 16+ weeks	FWB	None	Full lower extremity strength and maximum function.	Advanced dynamic drills, hopping, skipping, progress to sport specific drills. Progress to SL strengthening, work/sport specific activity, and running;

