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REHAB PROTOCOL: Lower Extremity Fasciotomy for Chronic Exertional Compartment Syndrome

Name:	Date: Date of Surgery:	
Diagnosis:		
Days 1-14:		
Goals:		
- Pain management		
- Prevent swelling		
☐ Crutches and PWB x 2 weeks		
☐ AROM hip and knee		
☐ Wiggle toes, gentle ankle AROM DF/PF as tolerated		
☐ Straight leg raises (SLR) x 4		
☐ Upper body exercises (seated or bench only – no push	nups)	
☐ LE stretches – hamstring, quads, ITB, hip flexors		
☐ Ice and elevation		
Weeks 2-4:		
Goals:		
- DF/PF		
- AROM WNL		
☐ Progress to WBAT (d/c crutches)		
☐ Continue appropriate previous exercises		
☐ Calf pumping, alphabet, rotations		
☐ Gentle DF stretch w/ towel		
☐ Light Theraband exercises x 4		
☐ Towel crunches and side-to-side		
□ Seated BAPS		
☐ Stationary bike (no resistance)		
☐ Leg press < 25% body weight and pain-free		
☐ Calf press < 25% body weight and pain-free☐ Ice as needed☐		
☐ Compression stocking if persistent swelling		
Compression stocking it persistent swelling		

Weeks 4-6: Goals:

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Frequency:times per week	Duration:week
Comments:	
☐ Transition to home/gym program 2x per weel	X.
☐ Agility drills/plyometrics	le.
o No post-exercise swelling	
o Pain-free 2 mile walk at 15min/mile p	pace
o 3 x 20 heel raises with LE strength 90	% of uninvolved
☐ Running progression program when following	
☐ Continue appropriate previous exercises -	
- Pass APFT at 4 months post-op	
- Run 1 mile at 12min/mile pace with min symptoms at 2	3 months
Goals:	
Weeks 12-16:	
o Pool therapy - unrestricted	
o Stairmaster	
o Treadmill – walking progression prog	ram
☐ Progressive low-impact cardio program	
o Sit-up progression	
o Fitter, slide board o Push-up progression	
o Knee extension and HS curl weight m	achine
o Leg press and hip weight machine	1.
☐ Progressive strengthening program	
☐ Continue appropriate previous exercises	
- Walk 2 miles at 15min/mile pace with minimum symp	toms
- Strength via weight machines 90% of non-involved	
- 45 min low-impact cardio 5/week	
Weeks 6-12: Goals:	
W 1 (12	
\square Pool therapy – chest or shoulder deep water r	unning (optional)
☐ Elliptical trainer	
☐ Treadmill – walking forwards and backwards	•
☐ Double to single leg BAPS, ball toss, and bo	
☐ Double leg heel raises — progress to single leg	g heel raises
☐ Mini-squats, wall squats, total gym	i mvolved EE)
 ☐ Theraband exercises x 4 – gradually increase ☐ Steamboats (Theraband x 4 while standing or 	
☐ Scar massage (if incision well healed)	• ,
☐ Continue appropriate previous exercises	
\square WBAT	
- Normal walking gait x 1 mile	
- 10 single leg heel raises	