



Achilles Tendon Repair Post-op Protocol

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If you have any questions about this protocol or about the patient, do not hesitate to email Dr. Metzler at: ametzler@orthonky.com

This protocol provides you with general guidelines for initial stage and progression of rehabilitation according to specified time frames, related tissue tolerance and directional preference of movement. Specific changes in the program will be made by the physician as appropriate for the individual patient.

REMEMBER: It can take up to a year to make a full recovery, and it is not unusual to have intermittent pains and aches during that time!

Phase I: Weeks 1-3

- Will be in a short leg Cast or boot(based on tissue quality during repair). NWB (non weight bearing) when walking. Can put foot down for balance when standing
- Will use crutches or a Roll-About
- Encourage ADL as much as possible
- Rest and **elevation between ADL**
- Hip AROM: lying and standing. Knee AROM: lying and standing
- Straight leg raises, quad squeezes
- Upper body weight training allowed in cast

Phase II: Weeks 4-6

- **WBAT in walker boot starting at week 4 with hinge in slight plantarflexion. Hinge set to 0 degrees by 6 weeks.**
- **PT out of boot, ALL WALKING IN BOOT, No walking without boot, may remove boot to sleep, shower at 4 week.**
- **You can not drive for 4-8 weeks after surgery if right foot and therapist must clear you.**
- **Exercises: ALL with strict limit of ankle dorsiflexion to neutral until 6 weeks**
 - Isometrics of calf
 - Theraband resistive strength: PF, Inv, Ever, DF
 - PF strength most important (Incorporate great toe flexion with ankle plantarflexion)
 - Sitting calf raises (pain free)
 - Bilateral straight leg raises, quad set
Baps sitting
- Incisional/soft tissue massage, scar mobilization and modalities begin.

- Control swelling with elevation
- Toe flexion/extension

Phase III: Weeks 7-10

Goals

- continue Previous exercises
- Increase core, hip, and knee Strength
- Guidelines
- @ 8 weeks consider WB in shoe +/- ankle lace up brace, +/- heel lift
- Exercises
 - Calf raises (submaximal bilateral to unilateral), advance to unilateral as tolerated
 - Gradual advance to full/maximal one leg progressive resistive exercises as tolerated
 - SLOWLY increase gentle passive & active ROM and stretch on the Achilles past neutral
 - Calf strengthening!
 - Start bike with minimal to no tension
 - Leg press: Quads bilateral to unilateral
 - Standing BAPS (with support as needed)
 - Step ups/downs
 - Unilateral Stance: balance activities with challenges- such as ball toss
 - Mini squats-bilateral to unilateral
 - Deep water pool workouts-progress to swimming

Phase IV: Weeks 10-12

- Continue previous exercises
- Stationary bicycle: start to increase tension
- Limit activity until 12 weeks (walking, bike, , etc)
- Calf strengthening!

Phase V: Weeks 13-16

- Continue previous exercises
 - start light jog and progress to run as symptoms tolerate
 - Stepper- Increase resistance
 - Progress to advance dynamic drills 16 + weeks
 - Progress to sport specific drills 16 + weeks
 - Calf strengthening!

Phase VI: Week 16+

Goals

- Continue previous exercises
- Full lower extremity strength, CALF STRENGTH!
- Maximum function
- Work or sport specific activity

Phase VII: Weeks 26

- Return to competitive sport
- Note: Risk of re-rupture if jumping down from a height