REHABILITATION GUIDELINES AFTER ACHILLES TENDON REPAIR



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The intent of this protocol is to provide the therapist with guidelines of the post-operative rehabilitation course after an Achilles tendon repair. It should not be a substitute for one's clinical decision making regarding the progression of a patient's post-operative course based on their physical exam findings, individual progress, and/or the presence of post-operative complications. The therapist should consult the referring physician with any questions or concerns.

INDIVIDUAL CONSIDERATIONS:

PHASE I (0-3 weeks)

Goals

- Control inflammation and pain
- Full hip and knee motion
- Good quad control

Cast

• Short leg cast in neutral plantar flexion

Weight-Bearing Status

• NO Weight-Bearing

Therapeutic Exercises

- Hip and knee ROM and strengthening exercises
- Toe curls and toe spreads

PHASE II (3-6 weeks) Criteria

- Healed incision
- Minimal swelling

Goals

• Restore normal gait

Brace/Weight-bearing status

- Walking boot in 30° plantar flexion, may be adjusted each week into dorsiflexion by 5° increments
- Start with toe-touch and increase to partial weight-bearing
- Wear boot for sleeping
- Continue with crutches

Therapeutic Exercises

- Start gentle active dorsiflexion until Achilles stretch is felt
- Passive plantar flexion
- No active plantar flexion or passive dorsiflexion

PHASE II (6-10 weeks)

Criteria

- Healed wound
- Active and passive dorsiflexion to -10 degrees

Goals

- Establish normal gait
- Progress with strength, power, and proprioception
- Wean into regular shoe

Brace and Weight-Bearing Status

- Progress to full weight bearing
- May switch to shoes with a heel (cowboy boots, heel lift of ¹/₄")

Therapeutic Exercise

- Slowly progress with passive ROM and stretch on Achilles tendon
- Advance active dorsiflexion to neutral
- Initiate active plantar flexion at 8 weeks
- Begin stationary bike with heel push only
- Gait training
- May progress to pool swimming and jogging at 8 weeks

PHASE III (10-14 weeks)

Criteria

• Normal gait

Goals

• Advance with strengthening and proprioception

Brace and Weight-Bearing Status

- Wean to regular shoe as tolerated
- Full weight bearing

Therapeutic Exercises

- Progress to cycling in shoe
- Full active ROM in all planes
- Gentle full passive ROM in all planes
- Begin and gradually increase active / resistive exercises of the Achilles (i.e. submaximal isometrics, cautious isotonics, Theraband)
- Swimming

PHASE IV (14 weeks-6 months)

Criteria

• Enough strength and proprioception to advance to recreational activities

Goals

- Advance to recreational activities
- Transition to home PT program

Therapeutic Exercises

- Closed chain exercises: Controlled squats, lunges, bilateral calf raise (progress to unilateral), toe raises, controlled slow eccentrics vs. body weight
- Cycling, VersaClimber, elliptical trainer, rowing machine, Nordic Track (gradually)
- Plyometrics
 - Box Steps (6 and 12 inches)
- Proprioception
 - Balance on stable and unstable (BAPS) surface with eyes closed
 - Ball catching and throwing from stable and unstable surface

PHASE V (6-9 months)

Criteria

• Full range of motion and strength

Goals

• Progress to all sports and physically demanding job

Therapeutic Exercises

- Progress to jogging, then running
- Plyometrics
 - Stair Running
 - Box Jumps (6 and 12 inches)
 - Progress with eccentric loading
- Proprioception

- Mini-tramp bouncing
- Sports-specific drills (cutting, pivoting, start at 25% of speed and progress as tolerated)

Release to Sports

- Full painless ROM
- Full strength
- Able to perform all sports-specific drills