

Achilles Repair Protocol

Core Rehabilitation Guidelines

- Splint in plantarflexion for the first 2 weeks
- Non weight bearing for the first 4 weeks in a cam walker boot with Achilles wedge
- Partial weight bearing at 50% from 4-6 weeks in a cam walker boot with Achilles wedge
- Progress to weight bearing as tolerated in a boot by 6 weeks
- Regular shoes by 8 weeks

Specific Timeline: 0-2 Weeks

- Immobilization in splint, plantar flexion
- Keep the splint clean, DRY, and intact
- Non weight bearing with crutches

Specific Timeline: 2-4 Weeks

- Convert to CAM walker with Achilles wedge
- Remain non weight bearing with crutches

Specific Timeline: 4-6 Weeks

- Begin therapy at 4 weeks post op
- Progress to 50 % WB at 4 weeks post op
- Begin ankle ROM active dorsiflexion, passive plantarflexion
- May remove individual achilles wedges as motion progresses

Specific Timeline: 6-12 Weeks

- Progress to weight bearing as tolerated in boot at 6 weeks if incision healed
- May wean from boot into regular shoes with heel cup after 8 weeks post op if incision completely healed
- Restore ROM in all planes
- May progress to isokinetics

Specific Timeline: 12-16 Weeks

- ROM/stretching Achilles as needed, other LE muscles
- Gait: Ensure good gait pattern: heel-toe gait, good heel strike and push-off, stance
- time equal left to right
- SLB activities (eyes open/closed, head nods, arm movement)
- Progress to multiple planes
- Ankle theraband
- Begin functional strengthening exercises
- Leg press bilateral
- Leg press toes raises (bilateral, progress to unilateral)
- Progress to WB bilateral toe raises

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- Proprioception activities i.e. BAPS, balance board
- Hip and knee PRE's
- Soft tissue and joint mobes as needed
- Stairmaster, bike for cardio
- Ice as needed
- Criteria to progress:
 - Good gait mechanics
 - ROM equal to opposite side
 - Controlled inflammation
 - No pain
 - Plantarflexor strength 4/5 (perform 10 partial to full toes raises)

Specific Timeline: 4-6 Weeks

• BRACE INSTRUCTIONS:

- o Switch to pull on brace after 2 weeks post op
- o DC pull on brace after 6 weeks post-op
- TREATMENT RECOMMENDATIONS:
 - o Continue phase I exercises as appropriate
 - Advance AAROM knee flexion/extension exercises (emphasize full passive extension), hamstring/calf, flexibility, progress to standard bike, leg press (80 0° arc), mini squats, active knee extension to 40°, proprioceptive training, forward step up program, underwater treadmill (incision benign)
 - o Progress WB and DC crutches as quadriceps strength improves
 - o Progress/advance patients home exercise program (evaluation based)
- PRECAUTIONS:
 - Avoid descending stairs reciprocally until adequate quadriceps control & lower extremity alignment
 - o Avoid pain with the rapeutic exercise & functional activities
- MINIMUM CRITERIA FOR ADVANCEMENT:
 - o ROM 0-125°
 - o Normal gait pattern
 - o Demonstrate ability to ascend 8" step
 - Good patella mobility
 - o Functional progression pending functional assessment

Specific Timeline: 16-20 Weeks

- Progress previous exercises: hip and knee PRE's
- Progress to WB unilateral heel raises
- Stairmaster

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- Isokinetics for ankle (inv/ev, dors/pltf) optional
- Begin jumping progression: leg press, min-tramp, ground)
- Functional rehab
- Forward dips multiple plane for balance
- Begin light plyometrics
- Criteria to progress:
 - ROM equal to opposite side
 - Perform 20 unilateral toes raises (full range, pain-free)
 - Perform bilateral jumping in place 30 seconds each F/B, L/R with good technique

Specific Timeline: 20-24 Weeks

- Progress previous exercises
- Progress jumping to hopping
- Begin jogging/running when hopping is performed with good technique
- Sport specific drills for appropriate patients
- Criteria to discharge non-athletes:
 - Good gait pattern
 - ADL's without difficulty
 - Gastroc/soleus 4+ 5/5 strength
- Criteria to discharge athletes:
 - Good gait pattern
 - Patient performs the following tests within 80% of the uninvolved leg:
 - Hop for distance
 - Single leg balance reach
 - Isokinetic strength test
 - Maintenance program should stress continued strength and endurance work at least 2-3 times per week.