

BRUNSWICK 207.721.8411 PORTLAND 207.828.2121 SACO 207.710.5504 WINDHAM 207.553.7246

ACHILLES TENDON REPAIR

Rehabilitation Protocol

General Considerations:

- Timeframes mentioned in this protocol should be considered approximate with actual progression based on clinical presentation and physician direction.
- Patient usually nonweightbearing for 3-4 weeks.
- Physical therapy usually begins 4 weeks postop.
- Monitor the incision scar and tendon scar for mobility, implement regular soft tissue mobilization to avoid fibrosis.
- No running, jumping, or ballistic movements for 6 months.
- Remove heel prop between 4-6 weeks.
- Discontinue boot at 6-8 weeks.
- No U-heel raise for 12 weeks.

Phase I (4-6 weeks):

- Gait training with patient in bivalve cast or walking boot progress from nonweightbearing to partial weightbearing, and finally to full weightbearing.
- Soft tissue mobilization for scar tissue and modalities as indicated.

Exercises:

AROM

Thera-Band exercises

Calf stretch (seated, pain-free)

Seated calf raises

Straight leg raises

Seated BAPS

Well-leg stationary bike

Aquatic exercise including deep-well exercises



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Progress to Phase II when:

Physician indicates

Ambulating full weightbearing without assistive device

Plantarflexion, inversion, and eversion ROM equal bilaterally

Dorsiflexion ROM is neutral

Phase II (6-12) weeks:

- Gait training, if in bivalve cast, discharge at 6 weeks and progress to shoe with heel lift; if in walking boot, discharge at 8 weeks and progress to regular shoe.
- Soft tissue mobilization for scar tissue

Exercises:

Standing gastrocnemius and soleus stretch

Stationary bike (heel push only until 8 weeks)

Standing calf raises (approximately 8 weeks)

Mini-squats (bilateral to unilateral)

Closed chain step exercises (step-ups progress to step-downs)

Proprioceptive training (single-leg balance challenged as able)

Leg press (bilateral to unilateral)

Progress to Phase III when:

Physician indicates

Dorsiflexion ROM equal bilaterally

Unilateral stance equal bilaterally

Gait normalized



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Phase III (12 weeks - discharge):

- One-leg PREs (as tolerated).
- Lunges (multidirectional and walking).
- Unilateral calf raises (approximately 16 weeks).
- · Outdoor biking.
- Jogging (approximately 16-20 weeks, cleared by MD).
- Agility drills (approximately 16-20 weeks, cleared by MD),

Discharge criteria:

Physician indicates

Long-term goals achieved

Patient personal goals achieved