



Arthritis & Orthopedic
Medical Clinic

Rehabilitation Protocol: Achilles Tendon Repair

• Phase I (Weeks 0-2)

- **Weightbearing:** Non-weightbearing using crutches
- **Brace:** Patient in plantarflexion splint
- **No Formal PT**

• Phase II (Weeks 2-6)

- **Weightbearing:** As tolerated in CAM Walker Boot with Heel Wedges in place (first wedge removed at 4 weeks, second wedge removed at 6 weeks) - discontinue crutch use
- **Brace:** CAM Walker Boot at all times except showering and when working with PT
- **Range of Motion:** PROM/AROM/AAROM of the ankle from full plantarflexion to neutral (NO DORSIFLEXION PAST NEUTRAL), Inversion/Eversion, Toe Flexion/Extension
- **Therapeutic Exercises**
 - Seated heel raises
 - Isometric dorsiflexion to neutral
 - Resistance bands for plantarflexion/inversion/eversion
 - Proprioception exercises – single leg stance with front support to avoid excessive dorsiflexion
 - Soft tissue mobilization/scar massage/desensitization/edema control

• Phase III (Weeks 6 – 12)

- **Weightbearing:** Full weightbearing in athletic shoe
- **Range of Motion:** PROM/AROM/AAROM of the ankle – increase dorsiflexion every 2 weeks (10° of dorsiflexion by post-op week 8, 20° by week 10, 30° by week 12)
- **Therapeutic Exercises**
 - Standing heel raises
 - Single leg eccentric lowering
 - Proprioception exercises – balance board

• Phase IV (Months 3 – 6)

- Progress with strengthening, proprioception, and gait training
- Begin light jogging at 3 months. Start with brisk walk and slowly increase pace over several weeks
- Running/cutting at 4 months
- **Return to sports at 6 months**