



Achilles Tendon Repair – Rehab Protocol

David E. Hartigan, M.D.

POST OPERATIVE MANAGEMENT

- Posterior Splint (short leg, neutral ankle)
- NWB with crutches

Weeks 1-2

- Discontinue splint use
- Cryotherapy (Jobst compression/Cryocuff)
- Camwalker boot application
- PWB crutch ambulation (25-50%)
- Avoid passive heel-cord stretching
- Active dorsiflexion only

WEEKS 2-6

- Progressive weightbearing ambulation with walking boot to FWB at 4 weeks
- BAPs "Level 1-2-3" (seated PWB)
- Active range-of-motion dorsiflexion/plantar flexion unloaded
- Heel-Toe ambulation in boot
- Stationary cycling with minimal resistance (anterior foot placement)
- Flat-Footed standing balance/proprioception activities

WEEKS 6-12

- Discontinue walking boot, use heel cups for 2 weeks
- Progressive resistance Theraband ankle strengthening exercises
- Intrinsic foot muscle strengthening exercises
- Single Leg standing balance activities
- Active bilateral heel raises
- Initiate passive heel cord stretching
- Bilateral to unilateral standing, heel raise exercises
- Stationary cycling with progressive resistance (standard foot placement)
- Progressive depth (30⁰ to 90⁰ knee flexion) flat-footed mini-squats
- Progressive retrograde treadmill ambulation
- "Flat-Footed" single leg balance
- BAPs "Level 1-2-3" (seated PWB progressed to FWB standing)
- "On-Toes" standing balance/proprioception activities on mini-trampoline
- Progressive duration/velocity Stairmaster ambulation
- Lateral sliding board maneuvers

3-6 MONTHS

- Stationary jogging and jumping on mini-trampoline
- Straight ahead jog-to-run progression on a level surface
- Progressive acuity cutting agility maneuvers
- Large-to-small Figure of 8 agility maneuvers
- Sport/Position specific functional activities
- Running and agility maneuvers on progressive incline/decline surfaces
- Discharged to normal activities when cleared by doctor