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**WOODSON ACHILLES REPAIR REHAB PROTOCOL**

**General Info:**

This is a list of general guidelines for an Achilles repair rehab program. These guidelines may change based on fixation, condition of repaired tissue, variations in surgical procedures, age, and patient's response to treatment. Please call our office if there are any questions.

**Post-Op Weeks 0-3:**

- Cast in relaxed equinus (plantar flexion)
- Strict elevation about the level of the heart
- Sutures out at 2-3 weeks
- Non-weight bearing

**Post-Op Weeks 3-6:**

- Change to cast or boot with heel lift to maintain 20 degrees plantar flexion, at all times
- Ice compresses (ACE)
- Begin partial weight-bearing with heel lifts as above
- Gentle ROM exercises: plantar flexion, dorsiflexion to 0-10 degrees, plantar flexion/circumduction (both directions)
- Isometric inversion and eversion, toe curls with towel and weight, hamstring curls in prone with boot on for resistance
- Begin stationary bike with cast/boot with low resistance

**Post-Op Weeks 6-10:**

- Progress to full weight-bearing (use heel lift)
- Change boot to 0 degrees plantar flexion as tolerated, at all times
- Gentle passive dorsiflexion to 10 degrees dorsiflexion by the end of this phase
- Strengthening exercises: isometric inversion and eversion, dorsiflexion and plantar flexion, light-band resisted inversion, eversion, dorsiflexion and plantar flexion, prone knee flexion
- Compression and ice compresses
- Modalities

**Post-Op Weeks 10-16:**

- Wean out of boot
- Dorsiflexion- may push past 10 degrees dorsiflexion to pain tolerance
- Advance plantar flexion, dorsiflexion, inversion, and eversion strengthening (open and closed chain), hamstring curls
- Stationary biking, swimming, and elliptical trainer
- Cross fiber massage to Achilles tendon
- Modalities

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### **Post-Op Weeks 16-24:**

- Plantar flexion, dorsiflexion, inversion, and eversion strengthening
- Proprioception exercises
- Gradual return to functional activities at the end of this phase

### **Criteria for return to sports and previous activities:**

- Tip toe walking
- No pain or tenderness
- Satisfactory clinical examination