SHAYNE KELLY, DO
ORTHOPEDIC SPORTS MEDICINE · TRI-CITY ORTHOPEDICS

POST-OPERATIVE REHABILITATION PROTOCOL

Achilles Tendon Repair

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

0–4 Weeks PROTECT THE REPAIR

- Patient will begin therapy at approximately 2 weeks post-op.
- They will be NWB for 4 weeks. Usually patient will have been casted / splinted for about 2 weeks and then fitted in a walking boot with a wedge.

GOALS Strict NWB

4–6 Weeks PROTECTED WEIGHT BEARING

- PWB in walking boot, two crutches, beginning at week 4 (if no Achilles pain).
- Walking boot set at 15° PF, no movement allowed.
- PT is for ROM and gentle stretching at this stage (also for scar tissue massage if/when wound has healed, steri-strips off).
- **Modalities:** cryotherapy and e-stim for edema control
- Exercises to be performed at this stage are as follows and should be performed as long as no increased discomfort is experienced in the Achilles region.
- Ankle AROM in all planes (DF, PF, INV, EV, CW, CCW, ankle alphabet); NWB gastroc and soleus towel stretches
- Intrinsic foot exercises (marble pick-up and towel scrunches); seated BAPS; stationary bike (low resistance)
- NWB LE exercises such as SLR, SAQ, LAQ, and hamstring curls.

GOALS PWB in boot

6–8 Weeks PROGRESS WEIGHT BEARING

- Walking boot to allow 0–20° motion during ambulation, PWB; progress PWB and wean from crutches as tolerated.
- Continue PROM and joint mobilizations as needed; continue scar tissue massage.
- Continue cryotherapy and e-stim for edema control as needed
- Exercises to be performed at this stage are as follows and should be performed as long as no increased discomfort is experienced in the Achilles region.
- Theraband exercises (DF, PF, INV, EV); gait training out of boot

TRI-CITY ORTHOPEDICS · 6703 W RIO GRANDE AVE, BUILDING B, KENNEWICK, WA 99336 · (509) 460-5588 · SHAYNEKELLYORTHO.COM

- Begin with unilateral on treadmill emphasizing heel to toe contact
- Progress to bilateral treadmill and /or level ground ambulation
- Leg press/shuttle exercise with light resistance if ROM allows
- Unilateral balance on stable surface (only at week 8 if patient is ready)

GOALS Wean crutches

8–10 Weeks FULL WEIGHT BEARING

- FWB without assistive device,
- Progress walking boot ROM slowly from 0–20° to full as tolerated by patient; PROM and joint mobilizations as needed.
- Begin weight bearing and balance exercises as tolerated.
- Unilateral balance on stable surface (progress to unstable as tolerated)

EXERCISES

- Standing gastroc and soleus stretches; FWB exercises such as partial squatting and partial lunging
- Contrakicks and advanced dynamic balance exercises; bilateral calf raises (start supine on shuttle or leg press machine)
- Standing BAPS; continue gait training to eliminate antalgic pattern

GOALS FWB, no device

10–12 Weeks STRENGTHEN

- At week 10 discontinue walking boot.
- Continue manual techniques as needed (PROM, scar tissue massage, manual stretching)

EXERCISES

- Moderate paced walking on treadmill; stairmaster; progress squatting and lunging depth
- Unilateral balance (stable, then unstable) with ball toss; goal is to discharge from PT by the 12-week mark.
- Be sure to educate patient on continued healing and risk of re-injury
- At 12 weeks patient should be able to do the following with minimal pain:; full squat; full lunge
- Unilateral calf raise
- Return to sport (running, soccer, baseball/softball, volleyball, etc) at 6 months post-op.

GOALS Heel-raise progression

Return to Sport & Discharge Criteria

- Single-leg heel raise comparable to opposite side (height, reps, quality)
- Pain-free running progression; plyometrics only after adequate plantar-flexor strength
- Return to sport when cleared by Dr. Kelly (commonly 6–9+ months)

Time frames are guidelines — progress when phase goals are met, per Dr. Kelly and the treating therapist.

TCO TRI-CITY ORTHOPAEDICS

TRI-CITY ORTHOPEDICS · 6703 W RIO GRANDE AVE, BUILDING B, KENNEWICK, WA 99336 · (509) 460-5588 · SHAYNEKELLYORTHO.COM