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**Achilles Tendon Rupture / Repair Protocol**

**PHASE I**

**0-2 WEEKS**

NWB with assistive device x 2 weeks  
Immobilization in splint

**PHASE II**

2-6 weeks: 50 % WB with ROM walker boot  
Active dorsiflexion, passive plantarflexion, ankle ROM

**PHASE III**

6-12 weeks: FWB at 6 weeks if incision healed  
Begin PT at 6 weeks for strengthening

**PHASE IV: POW 12-16**

ROM/stretching Achilles as needed, other LE muscles  
Gait: Ensure good gait pattern: heel-toe gait, good heel strike and push-off, stance  
time equal left to right  
SLB activities (eyes open/closed, head nods, arm movement)  
Progress to multiple planes  
Ankle theraband  
Begin functional strengthening exercises  
Leg press - bilateral  
Leg press toes raises (bilateral, progress to unilateral)  
Progress to WB bilateral toe raises  
Proprioception activities – i.e. BAPS, balance board  
Hip and knee PRE's  
Soft tissue and joint mobs as needed  
Stairmaster, bike for cardio  
Ice as needed

Criteria to progress: Good gait mechanics

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ROM equal to opposite side  
Controlled inflammation  
No pain  
Plantarflexor strength 4/5 (perform 10 partial to full toes raises)

**PHASE V: POW 16-20**

Progress previous exercises: hip and knee PRE's  
Progress to WB unilateral heel raises  
Stairmaster  
Isokinetics for ankle (inv/ev, dors/pltf) – optional  
Begin jumping progression: leg press, min-tramp, ground)  
Functional rehab  
    Forward dips multiple plane for balance  
    Begin light plyos

Criteria to progress: ROM equal to opposite side  
    Perform 20 unilateral toes raises (full range, pain-free)  
    Perform bilateral jumping in place 30 seconds each F/B, L/R with  
    good technique

**PHASE VI: 5-6 months post-op**

Progress previous exercises  
Progress jumping to hopping  
Begin jogging/running when hopping is performed with good technique  
Sport specific drills for appropriate patients

**Criteria to discharge non-athletes:**

Good gait pattern  
ADL's without difficulty  
Gastroc/soleus 4+ - 5/5 strength

**Criteria to discharge athletes:**

Good gait pattern  
Patient performs the following tests within 80% of the uninvolved leg:  
    Hop for distance  
    Single leg balance reach  
    Isokinetic strength test

Maintenance program should stress continued strength and endurance work at least 2-3 times per week.

Revised: 9/04