Achilles Repair Guidelines

	WEIGHT BEARING	BRACE	RANGE OF MOTION	STRENGTH/EXERCISES	Goals
PHASE 1 0-2 WEEKS	NWB with crutches	Short Leg Splint	N/A	Leg elevation/edema control Upper body ergometer Curl toes down	Wound healing
PHASE 2 4-6 WEEKS	Progress to WBAT in CAM boot	CAM boot Worn at all times 2 heel lifts (2- 4 wks) 1 heel lift (4-6 wks)		SLR Knee ROM Ankle range of motion (ROM) with respect to precautions Pain-free isometric ankle inversion, eversion, dorsiflexion and sub-max plantarflexion Open chain hip and core strengthening	Normalize gait, wean out of crutches Protection of postsurgical repair May progress to phase 3 when pain-free active dorsiflexion to neutral and no wound complications
PHASE 3 6-12 WEEKS	WBAT in normal shoes (lift if needed)	Wean from brace	Full active ROM	Frontal and sagittal plane stepping drills (side step, cross-over step, grapevine step) Gentle gastroc/soleus stretching Static balance exercises (begin in 2 foot stand, then 2 foot stand on balance board or narrow base of support and gradually progress to single leg stand) 2 foot standing nose touches	Normalize gait on level surfaces without boot or heel lift Single leg stand with good control for 10 seconds Active ROM between 5° of dorsiflexion and 40° of plantarflexion

				Ankle plantarflexion strengthening with resistive tubing	
				Low velocity and partial ROM for functional movements (mini-squat,	
				step back, lunge) Hip and core strengthening	
				Pool exercises if the wound is completely healed	
PHASE 4 12-24 WEEKS	WBAT in normal shoes	N/A	Full active ROM	Frontal and transverse plane agility drills (progress from low velocity to high, then gradually adding in sagittal plane	Normal gait mechanics without the boot on all surfaces
				drills)	Squat and lunge to 70° knee flexion without
				Multi-plane proprioceptive exercises – single leg stand	weight shift
				1 foot standing nose touches	Single leg stand with good control for 10 seconds (20 reps)
				Ankle strengthening – concentric and eccentric gastroc strengthening	before sports-specific exercises
				Functional movements (squat, step back, lunge)	Active ROM between 15° of dorsiflexion and 50° of plantarflexion
				Stationary bike	
				Sports-specific drills (4 mo)	Dynamic neuromuscular control with multi-plane activities, without pain
					or swelling