



Achilles Repair Protocol

Applicability: Physician Practices	Date Effective: 12/2016
Department: Rehabilitation Services	Date Last Reviewed / or Date Last Revision: 12/2016
Supersedes:	

Purpose: Define the protocol to be followed for all patients referred from Northwestern Orthopedics after the above procedure has been performed.

Policy Statement: Treatment will follow the defined protocol below and be carried out by Physical Therapist, Athletic Trainer and/or Physical Therapy Assistants.

Background: N/A

Definitions: N/A

Procedure:

PHASE I 0-2 Weeks

NWB with assistive device x 2 weeks

Immobilization in splint

PHASE II 2-6 weeks

Begin outpatient Physical Therapy (following 2 week MD follow up for removal of splint)

Camboot: set at 15° by MD at week 2

Set at 7.5° by PT at week 4

Gait: PWB 50% with Camboot and appropriate assistive device

Precautions:

NO passive dorsiflexion, no active plantarflexion

Gentle soft tissue mobilization and scar massage once incision has healed

Edema Control:

Ice/cryocuff

Elevation

Tensogrip/kinesiotape

ESTIM as indicated

Suggested exercises:

ROM:

Active dorsiflexion to tolerance

Passive plantarflexion to tolerance

Active and passive inversion and eversion

Knee and hip AROM and strengthening open chain

Optional at 4 weeks- aquatic ther-ex (once incision has healed), WBAT in chest deep water, no



resistance or passive stretching of gastroc/achillies

PHASE III 6-12 weeks

Camboot: set at 0° by PT at 6 weeks

Wean from Camboot at 8-9 weeks and educate in proper footwear (may need wide heel counter to minimize pressure on incision)

Gait: FWB at 6 weeks if incision healed

Gentle soft tissue mobilization and scar massage once incision has healed

Suggested Exercises:

- Begin strengthening
- AROM in all directions
- Gentle passive Achilles stretching
- Continue strengthening hip, knee and core
- Stationary bike without resistance

PHASE IV 12-16 weeks

ROM/stretching Achilles as needed

Gait: Ensure good gait pattern: heel-toe gait, good heel strike and push-off, stance time equal left to right

Suggested exercises:

- Balance and Proprioception activities
- Progress ankle strengthening
- Begin functional strengthening exercises
- Leg press - bilateral
- Leg press toes raises (bilateral, progress to unilateral)
- Soft tissue and joint mobs as needed
- Stairmaster, bike for cardio

Criteria to progress:

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

PHASE V 16-20 weeks

Suggested exercises:

Progress previous exercises: hip and knee PRE's

Progress to WB unilateral heel raises

Stairmaster

Begin jumping progression: squat to heel raise at slow speed, leg press, min-tramp, ground Functional rehab

Forward dips(dip down from stair) multiple plane for balance

Begin light plyometric activities



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

Suggested Exercises:

- 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

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

Note Well: Variances will be communicated by the surgeon directly to Rehabilitation Services.

Monitoring Plan: Will be reviewed yearly

Related Policies: N/A

References: N/A

Reviewers:

- A. Key Stakeholders:** Michael Barnum MD, Ortho Medical Director
- B. Committees:** N/A
- C. Key Process Owner (KPO):** Kristy Cushing, Manager Rehab Services
- D. Administration Approval:** Amy Putnam, VP Physician Services

Not part of policy: [ADD Key words for policy search if end user didn't know the name]