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ACHILLES TENDON RUPTURE / REPAIR - Accelerated Functional Rehabilitation Protocol

0 – 2 WEEKS

- Plaster half-cast with ankle pointing down
- Modalities to control swelling
- Commencement of blood thinner to reduce risk of DVT
- Non weight bearing with crutches

2 – 6 WEEKS

- Specialised moon boot with heel lift (3-4 wedges) or adjustable boot, with gradual change to plantigrade over time
    - Remove 1 wedge per week, or 5 degrees per week, until plantigrade at 6 weeks
- Touch weight bearing with crutches initially and gradual increase to weight bearing as tolerated with crutches when plantigrade
- Active plantar and dorsiflexion to current wedge position/inclination, inversion /eversion below wedge position only
- Avoid passive dorsiflexion past neutral
- Knee/ hip exercises as appropriate

6 – 8 WEEKS

- Continue moon boot at plantigrade
- Weight bear as tolerated
- Active plantarflexion and dorsiflexion to neutral
- Avoid passive dorsiflexion past neutral
- Graduated calf strengthening exercises – active plantarflexion, progressing to seated calf raises and theraband resistance
- Proprioceptive and gait retraining
- Hydrotherapy optional
- Cease blood thinners once weight bearing as tolerated

8 – 12 WEEKS

- Wean off boot
- Continue to progress ROM (past neutral), strength, proprioception
- Low velocity agility drills; single leg balance; functional movement exercises.
- Commence standing double leg heel raises.

>12 WEEKS

- Continue to progress ROM, strength, proprioception
- Retrain strength, power, endurance
- Commence standing single leg calf raises
- Sport specific retraining