Achilles Tendon Repair

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Patient	 	
DOS		

	a Falls, WI 54729			
WEEKS 1-2	WEEKS 3-4	WEEKS 5-6	WEEKS 7-8	WEEK 9-12+
NWB	WBAT in CAM boot, assistive	WBAT avoiding strong heel	WBAT, avoiding heavy impact	Single leg balance and
Large splint in place	device as needed	strike. ASO with heel lift in supportive shoes.	at heel. Heel lift in shoe.	proprioception
Heel Slides	Initiate PT, 2-3x/week for		Progress ROM, accessory joint	Standing heel raises, double
	edema, decongestive massage,	Continue with edema control	mobs to full.	leg to single leg
Quadricep Sets	pain control and exercise.			
		Exercise Bike	Dorsiflexion to full, gradually	Wall squats/ sits
Gluteal Sets	After stitches are removed, start		to straight knee.	
	gentle scar mobilization.	PROM to full for dorsiflexion		Address functional activity
Hip and Knee Open Chain		with knee flex, as tolerated.	Gastroc-soleus stretching	demands.
Strengthening	Start pool therapy with		program, progress to	
	occlusive dressing or well	Plantarflexion isometrics	unrestricted.	Begin running program at 12
Compressive stocking as	healed wound.			weeks.
needed for swelling control.		Seated to standing BAPS board	Leg Press	
	Gentle AROM and PROM to			
Physical therapy is initiated	full for inversion, eversion and	Ankle isotonics for DF, Inv, Ev	Plantar flexion isotonics	
early to promote blood flow	plantarflexion.			
and healing as well as		Seated heel raises	Lateral Step ups	
decrease swelling and pain.	Submax ankle isometrics for			
This should allow for a steady	DF, Inv, Ev	Total Gym or Leg Press with	Double leg balance	
progress of exercise, gait and	T	light weights		
balance.	Joint mobilizations for	D 1.4	Gait activities	
	accessory motions	Progress pool therapy	D 1.1	
	Gate enatate a		Progress pool therapy	
	Gait training.	PT 2-3x/week	PT 2-3x/week	PT 2x/week with decrease in
	Hip, Quad and Hamstring	P1 2-3x/week	P1 2-3x/week	
	Strengthening			frequency as tolerated.
	Strengthening			
Any Questions? Please contac	<u> </u>		1	
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