

Accelerated Achilles Protocol

For patients of Dr. Lau

0-2 weeks after surgery:

- In a splint
- Non-weight bearing with gait aid

2-4 weeks after surgery:

- Transfer to fracture boot with 2" heel lift; protective weight bearing with gait aid
- Active plantarflexion and dorsiflexion to neutral, inversion/eversion to below neutral
- Modalities to control swelling
- Incision mobilization modalities
- Hip/knee exercises with no ankle movement e.g. leg lifts from sitting/prone/side lying
- Non weight-bearing fitness/cardiovascular exercises e.g. bicycling with one leg

4-6 weeks after surgery:

- Weight bearing as tolerated in fracture boot.
- Continue with 2-4 week protocol

6-8 weeks after surgery:

- Remove heel lift
- Weight bearing as tolerated in fracture boot
- Dorsiflexion stretching (slowly)
- Graduated resistance exercises (open & closed kinetic chain as well as functional activities)
- Modalities and incision mobilization as indicated
- · Weight bearing as tolerated fitness/cardiovascular exercises e.g. bicycling, treadmill, elliptical, StairMaster

8-12 weeks after surgery:

- Wean off boot- return to gait aid as necessary and gradual wean off
- Continue to process range of motion, strength and proprioception

>12 weeks after surgery:

- Retrain strength, power, endurance
- Increase dynamic weight bearing exercises, include plyometric training
- Sport specific retraining

Dr. Johnny T.C Lau, MD, MSc, FRCSC Phone: 416-603-6292 Fax: 416-603-3437