



**REHABILITATION GUIDELINES FOR NONOPERATIVE TREATMENT OF ACUTE ACHILLES TENDON TEARS**

0-2 weeks:

Gravity equinus short leg cast  
Non weightbearing

2-6 weeks:

Anterior molded orthoplast orthosis with 45 degrees of plantar flexion.  
Decrease plantar flexion 10 degrees per week and bring to neutral at 6 weeks post-injury  
Elevated heels on both shoes, decrease height weekly to match splint  
Strength: 4-5 x/day-remove plantar strap for active plantar flexion exercises beginning with 10 repetitions and increasing by 5 repetitions per day to a maximum of 40. Use circle of exercise tubing looped over foot:

<u>week</u>	<u>color tubing</u>
2	none(active only)
3	yellow
4	red
5	blue
6	black

2-4 weeks:

Three point crutch weight bearing initiated with 10% body weight increasing by 5% body weight per week up to 20% body weight as tolerated.

4-8 weeks:

Three point crutch weight bearing increasing weight bearing by 20% body weight per week as tolerated.

6 weeks:

Continue to use orthosis as a dorsiflexion stop at 0 degrees by releasing the foot strap

8 weeks:

- 1)ROM: begin stretching for plantar flexion, dorsiflexion, inversion, and eversion.
- 2)Strength: begin PRE for plantar flexion, dorsiflexion, inversion and eversion. Begin with seated toe raises and progress to two-legged toe raises and then two-legged raises with weights.
- 3)Weightbearing: discontinue crutches when able to walk normally without a limp. Single leg

balancing (foot-flat) with eyes open and closed.

12weeks:

discontinue use of orthosis, continue elevated heel.

16 weeks:

begin one-legged toe raises, discontinue elevated heel.

24 weeks:

begin functional rehabilitation if deficit is less than 30%