



**Achilles Tendon Repair  
Postoperative Recovery Protocol  
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Type of Procedure:           outpatient  
Length of Procedure:        1 hour  
Anesthesia:                    general w/ nerve block

**Rupture of the Achilles tendon: what is it?**

Rupture or tearing of the Achilles tendon is a common condition. This typically occurs in the unconditioned individual who sustains the rupture while playing sports, or perhaps from tripping. There is a vigorous contraction of the muscle and the tendon tears. The patient will often describe the sensation that someone or something has hit the back of the calf muscle. Pain is suddenly present, and although it is often possible to walk, it is painful and the leg is weak.

While it is possible to treat this ruptured tendon without surgery, this is typically not recommended except in specific circumstances as it is difficult to regain maximum strength and power in the tendon. The primary risk of operative treatment of a ruptured tendon is difficulty with wound healing and possible infection. The small sensory nerve that runs near the tendon can also be injured during a surgical procedure. The primary risk of non-operative treatment is an increased rate of re-rupture of the tendon, especially in the early phases of healing.

Immediately following the tendon repair, no walking on the foot is permitted, but only for the first few weeks. After your first post-operative visit, weight bearing activity is permitted in a removable boot. In addition, physical therapy will be initiated at this time, following an aggressive, but safe, rehabilitation protocol. The “old-fashioned” treatments used many years ago relied upon a cast applied to the leg, leading to tremendous weakness and atrophy of muscle, which was often permanent. With the accelerated rehabilitation protocol, this atrophy and weakness is limited with quicker return to functional activity within a year after surgery.

**General recovery factors:**

- You will not be walking on the leg for the first 2 weeks and may not be comfortable ambulating without crutches for a few weeks after that time period.
- The ankle and foot will remain immobilized in a splint for the first two weeks after surgery, then a boot for up to 5-6 weeks after the procedure. The splint and boot remain on the foot at all times (even at night) except as directed during your post-operative visit.
- If the surgery is on your left ankle, you should be able to drive an automatic vehicle whenever off narcotic pain medication. If the surgery is on the right ankle, you may typically start driving around 8-10 weeks after surgery.

- Physical therapy is critical to regain strength and power in the Achilles following surgery.
- You should plan to use a physical therapist for about 3 months.
- There will be moderate swelling of the ankle and leg for up to a year, though much of the swelling improves within the first 3-4 months.
- You will continue to improve your strength and gait for up to 1 year after the surgery.

**Specific postoperative course (these are general guidelines, your specific individual postoperative treatment may be different):**

Day 1-2

- The foot is wrapped in a bulky bandage and splint.
- Ice, elevate, take pain medication.
- Expect numbness in the foot for 12-24 hours.
- Bloody drainage through the bandage is expected.
- Do not change the bandage.
- Do not get the splint dirty or wet.

2 Weeks

- First follow-up in the office, stitches removed.
- Transition into a short leg boot.
- Start full weight bearing on the foot in the boot with two heel lifts.
- An accelerated physical therapy rehabilitation protocol is initiated.
- Pain should be used as a guideline to advance activity; back off activities or weight bearing if pain significantly increases.

6 Weeks

- Generally by this follow-up visit, you are walking comfortably in the boot without the heel lifts.
- Low-impact exercise has been permitted in the boot (biking, elliptical)
- Transition into a supportive sneaker with the two heel lifts.

12 Weeks

- Low-impact activity is relatively comfortable in a sneaker without a heel lift.
- Start to progress into impact activity (running, jumping, etc.) as directed by the rehabilitation protocol.
- Physical therapy may continue for another 1-2 months depending on progress.
- Continued improvements in strength and power in the Achilles are seen up to one year following the surgery.

Sport-specific training typically begins around 16 weeks postoperatively. Return to normal sporting activity that does not involve contact or sprinting, cutting, jumping, etc. is expected between 4-6 months if there has been at least 80% regained strength in the calf muscles. Sporting activity requiring sprinting, jumping, cutting, or contact is typically advanced by 6 to 9 months postoperatively.

You will receive a copy of the accelerated rehabilitation protocol for you and your therapist at your first follow-up visit. This protocol provides very specific exercises for the Achilles that are designed to allow a safe and controlled progression of activity. Please do not push through the exercises faster than allowed as this will place the tendon repair at risk.

You can often find additional information about your procedure or condition on the TCO website at <https://www.tcomn.com/physicians/jeffrey-seybold> or <https://www.tcomn.com/specialties/ankle-care>.

Additional information from reputable orthopaedic foot and ankle surgeons affiliated with the American Orthopaedic Foot and Ankle Society can be found at <http://www.footcaremd.com>.