

Matthew Gotlin, MD 159 East 74th Street New York, NY 10021

REHAB PROTOCOL: Achilles Tendonitis

| Name: | Date: |
|--|--|
| Diagnosis: | Date of Surgery: |
| DHACE L (Washa 0.2) | |
| PHASE I (Weeks 0-2) | 112 |
| • Avoid sports activities if pain or sw | |
| • Heel lift insert as necessary for pair | n |
| • Exercises to be done without pain | /1 |
| | es/day: flexion, eversion, dorsiflexion, inversion |
| • Ice for 20 minutes post-exercise | |
| PHASE II (Weeks 2-6) | |
| • Light pain-free activity – avoid st | trenuous sports activities |
| • Exercises 1-2x per day: 5 days per | • |
| o Two-leg toe raises x 10 | ·· · · · · · · · · · · · · · · · · · |
| o Up on both legs, down on a | ffected leg x 10 |
| o Two-leg toe raises x 10 | |
| • Ice for 20 minutes post-exercise | |
| • | free: calf stretch, tilt board stretch, dorsiflexion stretch |
| PHASE III (Weeks 6-12) | |
| • Weeks 6-8 | |
| o Remove heel lift | |
| o Exercises: | |
| ☐ Two-leg toe raise x 10 | |
| ☐ Up on both legs, down on a | affected leg x 10 |
| ☐ Up and down on affected le | <u> </u> |

159 East 74th Street New York, NY 10021 Tel: 212-737-3301 Fax: 212-734-0407

 \square Two leg toe raise x 10

o Increase toe raise on affected leg to 2 sets

2 Overhill Rd, Suite 310 Scarsdale, NY 10583 Tel: 914-725-6970 Fax: 914-725-6972 1600 Stewart Ave, Suite 100 Westbury, NY 11590 Tel: 516-243-8506 Fax: 212-734-0407

• Weeks 8-10

- PHASE IV (10 weeks and Beyond)
 Increase toe raise on affected leg to 3 sets
 Increase dynamic weight-bearing exercise plyometric training
 Sport-specific training
 Work to restore strength, power, endurance
 Gradual return to sports activities

| Comments: | | | |
|------------------|----------------|--------------|-------|
| Frequency: | times per week | Duration: | weeks |
| Signature: | | Date: | |