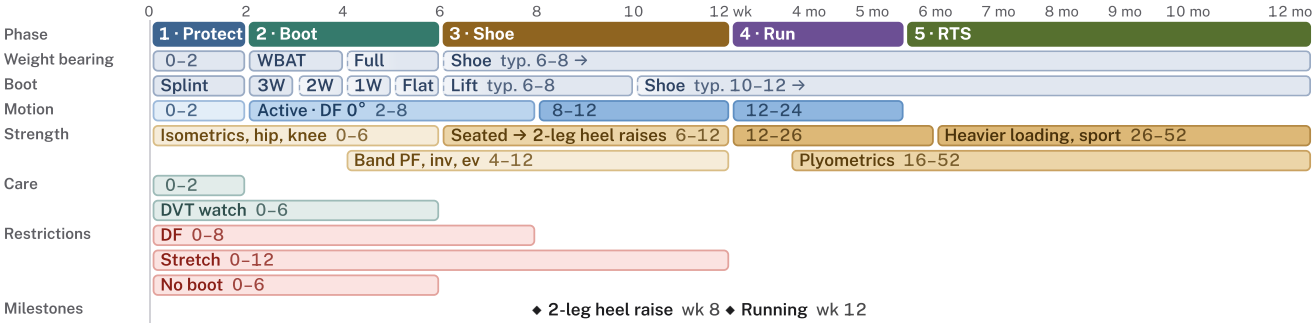
Achilles Tendon Repair Protocol

Surgical repair · Version 2026.10 · Reviewed Oct 2026 · HEP Drop staff · Reviewed by a licensed physical therapist

⚠ General reference for licensed clinicians, not individual patient instructions. The operating surgeon's protocol takes precedence.

At a glance: Splint wk 0–2 · WBAT in the boot from wk 2 · 3 wedges out one every 1–2 wk · full in the boot typically wk 4 · no DF past neutral to wk 8 · shoe with a heel lift typically wk 6–8 · running from wk 12 once criteria are met · sport from 6 mo. Criteria-based, test-gated.



PHASE	✓ GOALS AND ALLOWED	✕ AVOID	□ ADVANCE WHEN
Phase 1 Protect the repair wk 0–2 if criteria met	**Protect the repair and the wound**[1] **· Control swelling: elevation and cold**[1] **· Keep the hip and knee strong**[1] **Weight bearing:** WB per the surgeon (commonly none or touch-down), crutches **Boot:** splint or boot in plantar flexion • Toe, knee and hip exercises in the splint[5, 1] • Submaximal calf isometrics inside the splint or boot, pain-free[1]	AVOID — UNTIL Dorsiflexion past neutral — **wk 8** Calf stretching — **wk 12** Walking without the boot — **wk 6** Driving until the surgeon has cleared it (no source gives a week) Pool or soaking (one compared protocol)[26] — **the wound has healed**	☐ Wound healed[1] ☐ Surgeon clears loading in the boot[1]
Phase 2 Boot and early motion wk 2–6 if criteria met	**Weight bearing in the boot, full by about wk 4**[2, 3, 1] **· Wedges out, one every 1 to 2 weeks, to a flat boot**[2, 5] **· Active dorsiflexion to neutral, knee bent**[1] **Weight bearing:** WBAT in the boot, crutches **Boot:** boot, 3 heel wedges • Active plantar flexion, inversion and eversion out of the boot, seated[6, 5] • Stationary bike in the boot, once the wound has healed[4, 1] • Band plantar flexion from wk 4[5]	**Still in effect:** DF past neutral (wk 8) · Calf stretch (wk 12) · Walking w/o boot (wk 6) · Driving until the surgeon has cleared it (no source gives a week)	☐ Full weight bearing in the boot without pain[1] ☐ Active dorsiflexion to neutral, knee bent[1]
Phase 3 Out of the boot wk 6–12 if criteria met	**Out of the boot into a shoe with a heel lift, then a flat shoe**[3, 5] **· Normal gait in shoes**[1] **· Full-range double-leg heel raise**[1] **Weight bearing:** full WB in a shoe (typically, once criteria are met) **Boot:** shoe with a heel lift (typically, once criteria are met) • Seated heel raises, knee bent, then double-leg standing heel raises[1] • Squats, step-ups and lunges in the available range[1] • Balance work[5]	NEW IN THIS PHASE — UNTIL Stairs and other high eccentric loads[1] — **there is a strength base** Running and jumping[1] — **wk 12** **Still in effect:** DF past neutral (wk 8) · Calf stretch (wk 12)	☐ Pain-free full-range double-leg heel raise[1] ☐ Normal gait in shoes[1]
Phase 4 Single leg, running, jumping wk 12–24 if criteria met	**Single-leg heel raises through full range**[1] **· Running, once the running criteria are met**[1] **· Plyometrics from about 4 months, low-level first**[5, 1] **Boot:** shoe without a heel lift (typically, once criteria are met) • Eccentric calf work from wk 12[5] • Gentle standing calf stretching from wk 12[1] • Running progression once the running criteria are met, and plyometrics from wk 16, low-level drills first[1, 5]	NEW IN THIS PHASE — UNTIL Running[1] — **the running criteria are met**	☐ Running and plyometric progressions completed[1]
Phase 5 Return to sport wk 24–52 if criteria met	**Sport-specific drills and full plyometric progression**[1] **· Return-to-sport criteria, not before 6 months**[1, 13] • Heavier and eccentric calf loading past neutral[1]	NEW IN THIS PHASE — UNTIL Sport[1] — **the return-to-sport criteria are met**	**Discharge from PT when** The return to sport criteria: page 2

Achilles Tendon Repair Protocol · exercises and sources

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Exercises by phase

* sets and reps are our default.

Phase 1 · Protect the repair wk 0–2

Quad Set 2–3 × 10–15*
Active Straight Leg Raise with Quad Set 2–3 × 10–15*
Hip Abduction (Side-Lying) 2–3 × 10–15*
Prone Hip Extension 2–3 × 10–15*
Toe Yoga 2–3 × 10–15*
Isometric Ankle Plantarflexion submaximal, pain-free

Phase 2 · Boot and early motion wk 2–6

Ankle Pumps 10 × 10 s, 3 times a day
Isometric Ankle Inversion 10 × 10 s, 3 times a day
Isometric Ankle Eversion 10 × 10 s, 3 times a day
Stationary Bike in the boot, 10–20 min*
Resisted Ankle Plantarflexion (Band) 2–3 × 10–15* · from wk 4

Phase 3 · Out of the boot wk 6–12

Seated Calf Raise 2–3 × 10–15*
Standing Calf Raise 2–3 × 10–15* · from wk 8
Resisted Ankle Inversion (Band) 2–3 × 10–15*
Resisted Ankle Eversion (Band) 2–3 × 10–15*
Leg Press 2–3 × 10–15*
Standing Mini Squat 2–3 × 10–15*
Step Up 2–3 × 10–15*
Single Leg Balance 3 × 30 s*

Phase 4 · Single leg, running, jumping wk 12–24

Single Leg Heel Raise 2–3 × 10–15*
Eccentric Slow Lowers (Floor) 2–3 × 10–15*
Lateral Step Up 2–3 × 10–15*
Knee-to-Wall Dorsiflexion Mobilization 3 × 30 s, gentle*
Standing Calf Stretch (Gastrocnemius) 3 × 30 s, gentle*
Soleus Stretch (Bent-Knee) 3 × 30 s, gentle*
Walking Program build to 30 min*

Phase 5 · Return to sport wk 24–52

Eccentric Heel Drop (Straight Knee) 3 × 15*
Single Leg Heel Raise 2–3 × 10–15*

Return to sport when

- ☐ At least 6 months since surgery[13, 1]
- ☐ Plantar flexion strength ≥ 90% of the other leg[1]
- ☐ Surgeon clearance[1]
- ☐ Heel-rise test ≥ 90% of the other leg, for repetitions and total work[1]
- ☐ Single hop for distance ≥ 90% of the other leg[1]

Tests and pass marks

Test	Phase 1 exit	Phase 2 exit	Phase 3 exit	Phase 4 exit	Discharge · return to sport	Return to running
Single hop[22, 23]					≥ 90%	
Heel-rise test, PF strength[1, 3, 5, 18]					≥ 90%	
2-leg heel raise[1]			full-range 2-leg heel raise			
1-leg heel raises[1, 7]						10 full-range 1-leg heel raises
1-leg squat[1]						good 1-leg squat control

Written for surgical repair of an acute rupture. Non-operative care uses a similar boot plan, a little slower, and is not covered here[19, 20].

Key milestones vs published protocols

MILESTONE	THIS PROTOCOL	RANGE IN PUBLISHED PROTOCOLS
Out of the boot	**wk 6**	wk 6–16[24, 25, 26, 27], two of four by wk 8
Full weight bearing	**wk 4**	wk 6–12[24, 25, 27], three give a week: wk 6, wk 6–11, wk 8–12
Running	**wk 12**	wk 14 to 6 mo[24, 25, 27], three give a week: wk 14, 3.5 mo, 4+ mo
Return to sport	**from 6 mo**	24 wk to 6+ mo[24, 25], two give a time: 24 wk and 6+ mo

Published protocols agree on starting in plantar flexion and stepping down to a flat boot, and differ most on when weight bearing starts, how long the boot stays on, how far dorsiflexion and calf stretching are held back, and the running and return-to-sport gates. Sanford's 2026 edition is built on one of our sources[1], so where the two agree they count as one source, not two. A side-by-side comparison with published hospital protocols is at **hepdrop.com/p/achilles**.

Sources

1. Marrone 2024
2. Valkering 2017
3. Aufwerber 2020a
4. Aufwerber 2020b
5. Maffulli 2022
6. Carmont 2015
7. Christensen 2024
13. Zellers 2016
18. Zellers 2018
19. Costa 2020
20. Zellers 2019
22. Adams 2012
23. Grindem 2016
24. Sanford Health
25. Mass General Brigham
26. UW Health
27. Lahey Hospital & Medical Center

Full citations, licenses and what each source supports: **hepdrop.com/p/achilles**.