

PHYSICAL THERAPY PRESCRIPTION

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Name \_\_\_\_\_ Date \_\_\_\_\_

**Diagnosis:** *Right Left* \_\_\_\_\_ *Achilles rupture* \_\_\_\_\_

**DATE OF SURGERY:** \_\_\_\_\_

**SURGERY:** *Right Left* \_\_\_\_\_ *Achilles repair* \_\_\_\_\_

**Treatment Frequency:** *1-2x/week for 6 to 8 weeks for therapy*

<i>Phase</i>	<i>Time</i>	<i>Exercises/Activities/Restrictions</i>	<i>Goals</i>
Early Post op	0-2 weeks	<b>Non weight bearing on leg</b> Splint on until seen my MD Elevate leg as much as possible	Pain and swelling control
Phase I	2-6 weeks	<b>Continue Non-Weight Bearing</b> <b>Boot at all times except bathing</b> <b>No passive heel cord stretching</b> Active dorsiflexion to neutral Passive plantarflexion Inversion/Eversion exercises Scar massage	Healing of Achilles repair Control edema and pain Minimize scar formation Improve ROM to neutral
Phase II	6-12 weeks	<b>Begin Formal Physical Therapy</b> <b>Advance to full weight bearing</b> <b>Wean off boot by week 8-10</b> <b>No passive heel cord stretching</b> Heel lift in shoe to assist gait AROM dorsiflexion/ plantarflexion Inversion/eversion Bike OK Isometric inversion/eversion Begin proprioception training Forward step-up program Scar massage, Modalities Home Exercise Program	Range of Motion to normal Normalize gait Improve ankle strength
Phase III	12-20 weeks	Inversion/eversion strengthening Bike, stairmaster Proprioception training Aggressive plantar flexion strengthening Running in underwater treadmill Quad/Hamstring/hip strengthening Step-down program Modalities OK	Full ROM Normalize plantar flexion Normalize balance Ability to descent stairs
Phase IV	>20 weeks	Start forward treadmill running Advance proprioception training Light plyometric training Progress bike Progress strengthening	Pain Free Running Normal flexibility Sport-specific drills

\_\_\_\_\_  
Signature

**ON THE DAY OF SURGERY:**

**Ice:** Use ice or the cold therapy unit over the leg for 15 minutes every 1 to 2 hours to decrease pain and inflammation.

**Pain medication:** You will be given a prescription for a narcotic for pain control. Begin taking the pain medication as prescribed as soon as you have pain. Do not wait until you are in severe pain before taking them as it takes 30 to 45 minutes to work. You should be able to stop taking the pain medicine within two to three weeks. Avoid taking Tylenol while you are taking the narcotic as they both contain acetaminophen which can be dangerous to your liver in high amounts.

**Eating:** Begin eating with liquids and light foods (jello, soup, bread). Progress to your normal diet slowly over the 24 hours following surgery. The narcotics can make you nauseous, so take them with food whenever possible.

**DAY 1 AND UNTIL POST-OP VISIT:**

**Dressings:** Keep the splint on the surgical site until your first post-operative visit— usually 7-10 days after your surgery. This decreases the risk of post-operative infection.

**Bathing:** You may sponge bathe following surgery, but do not shower or get the surgical site wet until your sutures are removed. Once the sutures are removed you may shower or bathe and get the incision wet.

**Crutches:** Continue to use the crutches until your first post operative visit. You will be on crutches for 6-8 weeks. **DO NOT PUT WEIGHT ON THE LEG.**

**Boot:** At your first post-operative visit, most patients will be transitioned to a post-operative boot. You will wear this at all time except for sleeping, bathing, and doing exercises.

**Driving:** Do not drive until instructed to do so.

**Therapy:** Formal physical therapy will begin at 6 weeks, when you can begin walking. At your first post operative visit, the athletic trainers will teach you gentle range of motion exercises to be performed daily.

**Please call the office if you have any of the following:**

Fever greater than 101.5 or 38.5 degrees

Continuing drainage from the wound

Unrelenting pain

Excessive nausea/vomiting due to pain medication

ANY other worrisome condition

**If you have any questions, please feel free to call our office at  
760-247-8462.**

**First Post Operative Visit:** \_\_\_\_\_ at \_\_\_\_\_