Comprehensive Achillies Loading Protocol

Week 1-2 (longer if necessary) SYMPTOM MANAGEMENT AND LOAD REDUCTION PHASE

Patient Status	Loading Intensity	Goals
Pain and difficulty with all	Progress loading up to 100%	Start to exercise, and
activities, difficulty performing	body weight with slow,	understand the nature of the
10 x 1 leg heel raises.	controlled motion. If needed	injury and how to use the pain
	begin with aquatic , body	monitoring model.
	weight support, or isometric	
	plantar flexion.	

Exercise Program 1



Dorsiflexion/plantarflexion (Sets:3 Repetitions:10)



Plantar flexion on two legs- (Sets:3 Repetitions:10)



Single leg heel raise- (Sets:3 Repetitions:10)



Resisted plantar flexion (Sets:3 Repetitions:10)



Eccentric calf raise (leg straight) (Sets:3 Repetitions:10) raises

Week 2-5 (longer if necessary) RECOVERY PHASE.

If pain at the distal insertion of the tendon, continue standing on the floor

Patient Status	Loading Intensity	Goals
Pain with exercise, morning	The load on the Achillies	
stiffness, pain when performing	tendon is increased by	Start strengthening
heel raises.	increasing the speed of the	
	movement and by adding	
	external resistance. External	
	resistance is introduced once	
	the patient can complete the	
	body weight treatment program	
	without difficulty.	

Exercise Program 2



Calves strengthening (Sets:3 Repetitions:15 :once daily)



Plantar flexion, 1 foot (Sets:3 Repetitions:15 :once daily)





Eccentric calf raise (2 up, 1 down) (Sets:3 Repetitions:15 :once daily)



Weighted seated heel raise (Sets:3 Repetitions:15 :once daily)

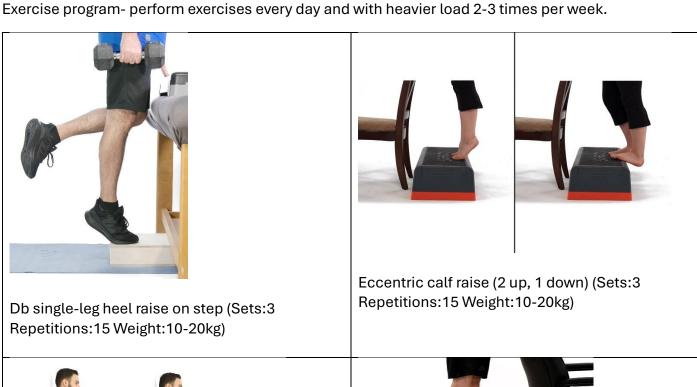


Quick-rebounding calf raise (2 legs) 150 beats per minute (Sets:3 Repetitions:20)

Week 3-12 (or longer if necessary) REBUILDING PHASE

If pain at distal insertion continue standing on floor

Patient Status	Loading Intensity	Goals
Tolerates the recovery phase	Continue to progress external	Heavier strength training,
exercise program well, no pain	resistance and initiate	increase or start running or
at the distal tendon insertion,	plyometric exercises according	jumping activity.
possibly decreased or	to patient tolerance	
increased stiffness.		





Soleus raise in squat position against the wall, eccentric on one leg (Sets:3 Repetitions:15 Weight:10-20kg)



Quick-rebounding calf raise (2 legs) 150 beats per minute (Sets:3 Repetitions:20)

Sport specific plyometrics

3-6 months (or longer if necessary) RETURN TO SPORT PHASE

Patient Status	Loading Intensity	Goals
Minimal symptoms, some but	Progress from previous phase	Maintenance exercise, no
not daily morning stiffness, can	to include sport specific	symptoms.
participate in sports without	loading speed and movement	
difficulty.	patterns on high intensity days.	

Exercise program- perform exercises 2-3 times per week

