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SPORTS MEDICINE & ARTHROSCOPY

Helping you move with less  
pain and greater confidence

## ACHILLES TENDON PRP INJECTION

Post-Injection Rehabilitation Protocol





# YOUR RECOVERY MATTERS

Your recovery depends on how closely you follow your care plan.

This protocol is designed to:

- ☒ Support healing of the Achilles tendon
- ☒ Reduce complications
- ☒ Restore strength and mobility
- ☒ Improve walking and movement mechanics
- ☒ Support a safe return to activity and sport

## WHAT YOU NEED TO KNOW

- Recovery is guided by healing and tendon loading tolerance
- Mild discomfort during rehabilitation may be normal
- Tendon healing takes time
- Recovery progresses gradually
- Symptoms should guide progression
- Avoid sudden increases in activity
- Healing and recovery following PRP may continue over several weeks

## IMPORTANT

- Do not compare your recovery to others
- Do not progress based on time alone
- Your rehabilitation plan may be modified by your surgeon or physiotherapist
- When in doubt, follow your surgeon's guidance

# PRP RECOVERY & EARLY HEALING



## WHAT IS PRP?

### Platelet-Rich Plasma (PRP)

Uses platelets and growth factors concentrated from your own blood.



## EARLY HEALING RESPONSE

It is normal to experience:

- temporary soreness
- stiffness,
- or swelling following a PRP injection.

A temporary inflammatory response is part of the healing process.



## EARLY GUIDELINES

- Avoid NSAIDs unless approved by your physician
- Protect the injection site
- Weight bear as tolerated (WBAT)
- Use modified rest
- Avoid aggressive calf stretching early
- Avoid explosive activity
- Avoid sudden increases in walking volume or activity



## REDUCE ACTIVITY IF

- Pain sharply increases
- Limping develops
- Swelling significantly worsens
- Symptoms remain elevated for greater than 24 hours



**Mild symptoms during rehabilitation exercises may be acceptable provided symptoms settle within 24 hours.**

# RECOVERY ROADMAP & REHABILITATION



Your recovery progresses through structured phases designed to safely restore movement, strength, stability, and return to activity.



## PHASE 1

### PROTECTION & EARLY HEALING

**Days 1-3**

Protect the injection site, reduce irritation, and promote early healing and circulation.



## PHASE 2

### MOVEMENT & ACTIVATION

**Days 4-14**

Restore ankle mobility, normalize walking, and begin tendon activation.



## PHASE 3

### STRENGTH & CONTROL

**Weeks 2-4**

Build calf strength, improve tendon loading tolerance, and restore balance and movement quality.



## PHASE 4

### ADVANCED LOADING & RECONDITIONING

**Weeks 4-12**

Improve strength, endurance, and dynamic control while prepping for running.



## PHASE 5

### RETURN TO SPORT & PERFORMANCE TRANSITION

**Weeks 12+**

Restore power, agility and confidence for a safe return to running and sport.

## IMPORTANT RECOVERY PRINCIPLES

- Progress on healing, not time alone
- Control swelling during recovery
- Movement quality matters most
- Do not rush progression
- Recovery timelines vary for each individual

# Phase 1 PROTECTION & EARLY HEALING

0AYS 1-3

## PRIMARY PHASE FOCUS

Protect the injection site, reduce irritation, allow early healing, and maintain gentle movement and circulation.

### GOALS



**Protect  
injection  
site**



**Reduce  
pain and  
irritation**



**Maintain  
gentle  
mobility**



**Promote  
circulation**



**Begin safe  
weight-  
bearing**



**Reduce risk of  
stiffness and  
complications**

### EXERCISES

### PURPOSE

Scan QR to watch

### HOW TO PERFORM

### WHAT YOU SHOULD FEEL

### COMMON MISTAKES

### DOSAGE/ PROGRESSION



**Calf Pumps**

Improve circulation and reduce blood clot risk

Move foot upward toward your head, then point away in a slow controlled motion

Gentle calf and ankle movement without strain

Moving too quickly or forgetting to perform regularly

20–30 repetitions every hour while awake



**Gentle  
Plantarflexion/  
Dorsiflexion**

Maintain gentle ankle mobility

Slowly move ankle through a comfortable range of motion

Mild ankle movement without sharp pain

Forcing motion or moving aggressively

10–15 repetitions, 3–4 times daily



**Inversion/  
Eversion**

Maintain ankle control and mobility

Slowly turn foot inward and outward in a controlled manner

Mild ankle activation

Rotating too quickly or forcing motion

10–15 repetitions, 2–3 times daily



**Lateral Weight  
Transfers**

Promote normal weight transfer and gait loading

Shift weight side to side while standing with control

Mild loading through both legs

Leaning excessively or shifting too quickly

10–15 repetitions, 3–4 times daily



**Gentle Walking**  
(Weight Bearing as  
Tolerated)

Promote normal walking mechanics

Walk short distances with controlled loading as tolerated

Mild calf activation without limping

Overwalking or limping significantly

Short frequent walks as tolerated

### PROGRESS WHEN



No signs of infection



Weight-bearing tolerated comfortably



No excessive swelling or redness



Symptoms remain manageable

## Phase 2

# MOBILITY & ACTIVATION

DAYS 4-14

## PRIMARY PHASE FOCUS

Restore range of motion, improve gait mechanics, activate surrounding musculature, and introduce controlled tendon loading.

### GOALS



**Restore ankle range of motion**



**Normalize gait mechanics**



**Begin calf muscle activation**



**Improve balance and proprioception**



**Introduce cardiovascular retraining**



**Prepare for strengthening progression**

### EXERCISES

#### PURPOSE

#### HOW TO PERFORM

#### WHAT YOU SHOULD FEEL

#### COMMON MISTAKES

#### DOSAGE/ PROGRESSION



**Dorsiflexion with Towel/Belt**

Improve ankle mobility and gentle calf mobility

Use towel or belt to gently pull foot toward body

Gentle stretch in calf and Achilles region

Pulling too aggressively

Hold 20–30 seconds, repeat 3–5 times



**Seated Wobble Board**

Improve ankle control

Perform controlled forward/ backward and side-to-side ankle movements

Mild ankle and calf activation

Moving too quickly or losing control

1–2 minutes, 2–3 sets



**Towel Crunches**

Improve intrinsic foot muscle activation

Use toes to scrunch towel toward body

Mild foot muscle fatigue

Curling entire leg instead of toes

10–15 repetitions



**Resisted Dorsiflexion**

Improve ankle strength and control

Pull foot upward against resistance band

Mild muscle activation in front of lower leg

Using momentum instead of controlled movement

10–15 repetitions, 2–3 sets



**Single-Leg Stance Balance**

Improve balance and lower extremity control

Stand on one leg while maintaining balance

Mild ankle and calf stabilization effort

Excessive trunk leaning or instability

Hold 20–30 seconds, 3–5 repetitions

### PROGRESS WHEN

- ☒ Full normal ambulation
- ☒ Full active and passive range of motion

- ☒ Full isometric strength without pain
- ☒ Minimal swelling or inflammatory response
- ☒ Minimal to no pain

**Phase 3**  
**STRENGTH & CONTROL**  
 WEEKS 2-4

**PRIMARY PHASE FOCUS**

Progress tendon loading, improve strength and endurance, enhance movement control, and prepare for higher-level functional activity.

**GOALS**



**Restore full range of motion**



**Improve muscular strength and endurance**



**Improve tendon tolerance**



**Improve balance and proprioception**



**Improve movement quality**



**Prepare for advanced loading progression**

**EXERCISES**

**PURPOSE**

**HOW TO PERFORM**

**WHAT YOU SHOULD FEEL**

**COMMON MISTAKES**

**DOSAGE/ PROGRESSION**



**Heel Raises**

Improve calf strength and tendon loading tolerance

Slowly rise onto your toes in a controlled manner, then lower back down with control.

Calf activation with mild tendon loading.

Rushing, pushing through pain, or poor control.

10–15 repetitions



**Step-Ups**

Improve lower extremity strength and movement control

Step onto elevated surface with controlled movement

Glute and calf activation

Knee collapsing inward or poor balance

10–15 repetitions, 2–3 sets



**Step-Downs**

Improve eccentric control and stability

Slowly lower body from elevated surface

Controlled calf and lower extremity loading

Dropping too quickly

10–15 repetitions



**Monster Walks**

Improve hip stability and lower chain mechanics

Walk laterally with resistance band maintaining squat position

Glute activation and lower extremity control

Standing too upright or dragging feet

10–15 steps each direction



**Standing Wobble Board**

Advance ankle control

Maintain controlled balance on wobble board

Moderate ankle stabilization effort

Excessive wobbling or poor movement control

1–2 minutes, 2–3 sets

**PROGRESS WHEN**

- ✓ Full ROM throughout mechanical chain
- ✓ Strength equal to unaffected side

- ✓ Full isotonic strength without pain
- ✓ Good single-leg control and balance
- ✓ No increase in swelling after activity

## Phase 4

# ADVANCED LOADING & RECONDITIONING

4 - 12 WEEKS

## PRIMARY PHASE FOCUS

Improve power, endurance, agility, movement quality, and readiness for running and sport-specific activity.

### GOALS



**Improve strength and endurance**



**Improve plyometrics**



**Improve agility and movement control**



**Prepare for running progression**



**Prepare for unrestricted return to sport**

### EXERCISES

#### PURPOSE

#### HOW TO PERFORM

#### WHAT YOU SHOULD FEEL

#### COMMON MISTAKES

#### DOSAGE/ PROGRESSION



**BOSU Ball Squats**

Improve balance, strength, and lower extremity control

Perform controlled squats on unstable surface

Moderate lower extremity activation

Knees collapsing inward or loss of balance

10–15 repetitions



**Walking Lunges**

Improve dynamic strength and control

Step forward into controlled lunge pattern

Glute, calf, and quadriceps activation

Excessive forward lean or poor knee control

10–15 repetitions each side



**Hopping Drills**

Introduce controlled plyometrics

Perform gentle forward / backward and side-to-side hops

Controlled tendon loading

Excessive force or poor landing mechanics

Begin with low volume and progress gradually



**Ladder Drills**

Improve agility and footwork mechanics

Perform controlled stepping patterns through agility ladder

Controlled footwork and coordination

Moving too quickly or losing control

Short intervals with rest as needed



**Agility Course / Change of Direction**

Improve sport-specific movement mechanics

Perform controlled directional changes and movement patterns

Dynamic lower extremity control

Sharp uncontrolled cutting movements

Progress gradually based on mechanics

### PROCESS WHEN

- ☒ Pain-free daily activities
- ☒ Controlled hopping mechanics

- ☒ No increase in swelling after activity
- ☒ Symmetrical strength and endurance

# RETURN TO SPORT & PERFORMANCE TRANSITION

## PRIMARY PHASE FOCUS

Safely restore athletic movement, running mechanics, power, and confidence while supporting a safe return to sport.

### GOALS



**Return safely to running and sport**



**Improve calf endurance and power**



**Improve landing mechanics and confidence**



**Restore confidence with athletic movement**



**Reduce reinjury risk**

### EXERCISES

#### PURPOSE

#### HOW TO PERFORM

#### WHAT YOU SHOULD FEEL

#### COMMON MISTAKES

#### DOSAGE/ PROGRESSION



**Running Progression**

Gradually restore running progression

Controlled running mechanics

Comfortable running with no increase in symptoms

Progressing distance or intensity too quickly

Gradually increase duration and intensity



**Plyometric Progression**

Improve tendon power and force absorption

Controlled jumping and landing mechanics

Tendon soreness and landing quality

Poor landing control or excessive force

Progress from double-leg to single-leg activities



**Agility Drills**

Restore dynamic athletic movement

Direction changes and coordination

Movement quality and confidence

Sharp uncontrolled cutting

Progress speed and complexity gradually



**Sport-Specific Training**

Prepare for return to sport demands

Sport-related movement patterns

Symptoms during and after activity

Returning to full intensity too quickly

Gradual sport reintegration



**Functional Movement Drills**

Improve movement confidence and performance

Multi-directional athletic movement

Symmetry and movement quality

Using poor movement patterns

Progress based on control and tolerance

### PROGRESS WHEN

- ☒ Full confidence in movement
- ☒ No pain or swelling after activity

- ☒ Symmetrical strength and endurance
- ☒ Cleared by your surgeon or care team

# LONG TERM SUCCESS & RECOVERY



**Recovery is an ongoing process.**

**Consistency, patience, gradual progression, and quality movement are essential for successful outcomes.**



## **LONG-TERM SUCCESS**

- Continue strengthening and conditioning
- Maintain calf mobility and flexibility
- Gradually increase your activity level
- Tendon healing continues even after symptoms improve.
- Consistency is essential for long-term success



## **REMEMBER**

- Tendon recovery is gradual
- Progress is not always linear
- Mild stiffness or soreness may fluctuate
- Avoid rapid increases in activity
- Listen to your body and care team guidance



## **CONTACT DR. ABOUALI'S OFFICE IF YOU EXPERIENCE**



**Increasing  
pain not  
improving  
with rest**



**Significant  
swelling**



**Fever greater  
than 101°F**  
(A low-grade fever  
may be normal in  
the first 1-2 days)



**Chills**



**Redness,  
warmth or  
drainage**



**Inability to  
weight bear**

**Seek immediate care if needed. Do not rely on email for urgent concerns.**

### **WEBSITE**

[www.torontosportsdoc.com](http://www.torontosportsdoc.com)

### **CONTACT CLINIC**

416-546-7373

### **YOUR REHABILITATION APP**

Continue your recovery through the rehabilitation app with personalized exercise videos, progress tracking, and recovery guidance.



**Your recovery is a process. Stay consistent, stay patient, and trust the plan.**