

ACHILLES TENDON MID-SUBSTANCE ULTRASOUND GUIDED PERCUTANEOUS TENOTOMY CLINICAL PRACTICE GUIDELINE

Procedure Benefits

The ultrasound-guided percutaneous tenotomy allows major surgery to be performed quickly through a small incision.

- Progression is time and criterion-based, depending on soft tissue healing, patient demographics, and clinician evaluation.
- For questions, contact Dr. Sujan Gogu's clinic.

Post-Procedure Care

Care will be customized based on your healing, demographics, and clinician evaluation.

Things to Avoid

1

Pain Medications: Avoid ibuprofen (Advil™, Motrin™), naproxen (Aleve™, Naprosyn™), and acetaminophen (Tylenol™) 1 week before and 1 month after the procedure.

2

Alcohol: Do not consume alcohol 48 hours before the procedure and while taking prescription pain medication.

3

Tobacco & Nicotine: Talk to your doctor about quitting as these can impair healing and reduce the procedure's benefits.

4

Diet: Fasting is not required; eat normally before the procedure and resume your regular diet when you feel ready.

Items to Receive from Your Medical Team	
1	Crutches
2	Boot
3	Peel-away heel lift (wear in boot and shoe at all times, gradually decrease use as instructed)
4	Therapy appointment schedule
5	Follow-up appointments (approximately 2 weeks and 6 weeks after the procedure)

Post-Procedure Care Table

Time Period	Instructions
Day of Procedure	<ul style="list-style-type: none"> • Arrange for a family member or friend to drive you home • Bring crutches, scooter, or boot to your appointment if provided • Do not put weight on the treated leg; use crutches, scooter, and boot for mobility • Rest and elevate your ankle to minimize swelling.
Days 2-3	<ul style="list-style-type: none"> • Continue avoiding weight-bearing; use crutches, scooter, and boot for mobility • Elevate your ankle at least three times daily to manage swelling. • Start gentle ankle range of motion exercises three times per day.

Progression	Instructions
Progression 1	<ul style="list-style-type: none"> • Start partial weight-bearing using crutches and a boot. If provided, use a foot orthotic in the boot. Expect some discomfort, which should ease by the next morning. • For scooter users, initiate partial weight-bearing by placing the non-treated leg on the scooter while bearing some weight on the treated foot. • Continue with ankle range of motion exercises and add

Progression	Instructions
	<p>isometric exercises three times daily.</p> <ul style="list-style-type: none"> • Apply soft tissue mobilization around the incision area, avoiding direct pressure.
Progression 2	<ul style="list-style-type: none"> • Begin to wean off the boot under the guidance of your therapist. • Maintain partial weight-bearing with crutches both at home and in public • Keep up with ankle range of motion exercises three times a day and continue isometric strengthening • Start non-impact aerobic exercises with a stationary bike and gentle swimming or pool activities once the wound is healed.
Progression 3	<ul style="list-style-type: none"> • Start reducing the use of crutches under therapist supervision. • First, walk without crutches at home, then use crutches for partial weight-bearing in the community. • Discomfort should diminish by the next morning. • Maintain ankle range of motion exercises, add gentle Achilles tendon stretches, and use resistance bands for ankle strengthening. • Begin balance exercises such as single-leg stance.
Progression 4	<ul style="list-style-type: none"> • Walk normally at home and in the community as directed by your therapist. Start with shorter distances and gradually increase • Use a peel-away heel lift in your shoe, removing layers as tolerated. • Enhance ankle strengthening with heavier resistance bands.
Progression 5	<ul style="list-style-type: none"> • Once walking normally, start using an elliptical machine with no incline and low resistance. • Gradually increase walking pace • Introduce leg press exercises, first for quadriceps strengthening, then progress to low-resistance calf raises, based on your care team's recommendations.

Progression	Instructions
Progression 6	<ul style="list-style-type: none"> Intensify biking, swimming, elliptical workouts, fast walking, and weight training. As you handle these activities without pain, begin incorporating higher-impact exercises like jogging, running, sprinting, and jumping as instructed by your care team.

Post-Procedure Care Summary

Discomfort

1

Some pain is normal for the first few weeks. Apply an ice pack to the painful area for 15 minutes as needed, up to three times a day for the first 2-3 days. Contact your care team if pain is concerning

Dressing

2

- Remove the dressing after 24-48 hours and replace it with a simple bandage.
- Keep an ACE wrap or compression sleeve on the ankle for 2 days. It should be snug but not too tight; if toes swell, the wrap is too tight.
- Remove sterile strip bandages when they start to peel off or after 7 days. Keep the area clean and dry.

3

Bathing: Avoid soaking or submerging the ankle in water for 1 week. Showering is permitted.

When to Call Your Provider

4

Contact your provider if you experience increasing redness, warmth, pain, fever, drainage from the wound, or other concerning issues. For urgent problems, go to your local emergency room.