



**Berkshire
Medical Center**
BERKSHIRE HEALTH SYSTEMS

BERKSHIRE MEDICAL CENTER

725 North Street
Pittsfield, MA 01201

www.BerkshireHealthSystems.com

Main Hospital
(413) 447-2000
Emergency Dept.
(413) 447-2834

EXITCARE® PATIENT INFORMATION

Patient Name: Michael Elbery

Attending Caregiver: Sarah Gargus, PAC / Alexander Rachmiel, MD

Achilles Tendon Rupture (Partial, Incomplete)

Tendons are the tough fibrous and stretchy (*elastic*) tissues that connect muscle to bone. The Achilles tendon is the large cord like structure (*tendon*) in the back of the leg just above the foot. It attaches the large muscles of the lower leg to the heel bone. You can feel this as the large cord just above the heel. The *diagnosis* (learning what is wrong) of incomplete Achilles tendon tear (*rupture*) is made by examination. Special x-rays will determine the extent of the damage (*injury*). The injury may be casted or immobilized for 6 to 10 weeks. An incomplete tear of the tendon may repair itself with rest and immobilization. *Immobilization* means that the injured tendon is kept in position with a cast or splint. It is not allowed movement. Once your caregiver feels you have healed well enough, they will provide exercises you can do to make the injured tendon feel better (*rehabilitate*).

HOME CARE INSTRUCTIONS

- **Keep leg elevated** above the level of the heart (the center of the chest) at all times when not using bathroom etc. Do not dangle the leg over a chair, couch, or bed. When lying down, elevate your leg on a couple pillows. Elevation prevents swelling and reduces pain.
- **Apply ice** to the injury for 20 minutes, 5 times per day. Put the ice in a plastic bag and place a towel between the bag of ice and your skin, splint, or immobilization device.
- Use crutches and move about only as instructed.
- **Avoid use other than** gentle range of motion of toes while the tendon is painful. Do not resume use until instructed by your caregiver. Usually full rehabilitation will begin sometime after casts or splints are removed. Then begin use gradually as directed. Do not increase use to the point of pain. If pain does develop, decrease use and continue the above measures. Gradually increase activities that do not cause discomfort until you achieve normal use without pain.
- Do not drive a car until your caregiver specifically tells you it is safe to do so.
- Only take over-the-counter or prescription medicines for pain, discomfort, or fever as directed by your caregiver.
- If your caregiver has given you a follow-up appointment, it is very important to keep that appointment. Not keeping the appointment could result in a chronic or permanent injury, pain, and disability. If there is any problem keeping the appointment, you must call back to this facility for assistance.

SEEK MEDICAL CARE IF:

- Your pain and swelling increase or pain is uncontrolled with medications.
- You develop new unexplained problems (*symptoms*) or an increase of the symptoms which brought you to

your caregiver.

- You develop an inability to move your toes or foot, develop warmth and swelling in your foot, or begin running an unexplained temperature.

MAKE SURE YOU:

- Understand these instructions.
- Will watch your condition.
- Will get help right away if you are not doing well or get worse.

FOLLOW-UP INSTRUCTIONS

02 - 03 days: James Harding, MD (Berkshire Orthopedic Associates) - 24 Park Street Pittsfield MA
01201- (413)499-6600 - - Orthopedics

ADDITIONAL NOTES AND INSTRUCTIONS

TAKE THE PAIN MEDICATION AS NEEDED BUT DO NOT TAKE IF DRIVING. ELEVATE THE FEET AS MUCH AS POSSIBLE. CALL ORTHOPEDICS TOMORROW FOR A FOLLOW UP APPOINTMENT IN 2-3 DAYS. RETURN TO THE ER IF WORSE.

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