

Medial Patellofemoral Ligament Reconstruction / Repair Rehabilitation Protocol Orthopaedic Research Clinic of Alaska

This PatelloFemoral Ligament Reconstruction / Repair Rehabilitation Program is an evidence-based and soft tissue healing dependent program which allows patients to progress to vocational and sports-related activities as quickly and safely as possible. Individual variations will occur depending on surgical details and patient response to treatment. Avoid ROM with chondrosis or pain when performing OKC knee extension strengthening exercises. If a **lateral release** is also performed, emphasis of patellar mobs should be on medial glides, inferior-medial glides, and medial tilts.

Please contact us at 907-644-6055 if you have questions or concerns.

| Phase I: 0-4 Weeks | Phase II: 4-6 Weeks | Phase III: 6-12+ Weeks |
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| ROM: wk 0-1: 0; wk 1-3: 0-90; wk 3-4: 0-100 | ROM: wk 4-5: 0-110; wk5-6: 0-120; D/C brace | ROM: wk 6-8: Full |
| WB: Brace locked for ambulation. 2-4 wks unlock brace for WB depending on quad control. Wk 0-1: TTWB; wk 1-2: 25%; wk 2-3: 50%; wk 3-4: 75% | WB: wk4-6: 100% with crutches; D/C crutches depending on quadriceps control | WB: Full with no limitations |
| Modalities: Cryotherapy 4x/day; IFC for pain/effusion; NMES quadriceps | Modalities: Cryotherapy IFC for pain/effusion; NMES quadriceps | Modalities: Cryotherapy; NMES quadriceps |
| RX: Recommendations: Sapega-McClure technique: <ol style="list-style-type: none"> 1. Active warm-up: Bike per ROM 2. Heat in stretch: Prone hang 1st TERT (TERT= Total End Range Time) 3. Mobilizations / ROM: PF mobs avoid lateral glides; Scar tissue massage 4. Therapeutic exercises; Flexibility exercises; Hams, Gastroc-soleus, Hip Biofeedback, QS w/ adductor squeeze, SLR, M<l, quad/hamstrings per ROM, Short arc quadriceps per ROM if no chondrosis, Hamstring isotonic per ROM, Hip 4-way SLR, Gastroc strengthening per WB CKC, leg press starting at 2 weeks per ROM, and WB Balance/proprioception exercises per WB, CV conditioning, Core stability, Upper body exercises 5. Ice in stretch: 2nd TERT 6. HEP for 3rd TERT | RX: Recommendations: Sapega-McClure technique: <ol style="list-style-type: none"> 1. Active warm-up: Bike per ROM; 5 wks add resistance to bike; Elliptical 2. Heat in stretch; 2nd TERT 3. Mobilizations/ROM; PF mobs- avoid lateral glides; Scar tissue massage 4. Therapeutic exercises; Flexibility Exercises; Hams, Gastroc-soleus, Hip, Quads, Biofeedback, QS w/ adductor squeeze, SLR, CKC knee ext, minisquats, wall slide, Short arc, quads/hams in ROM without chondrosis, total leg strengthening, hamstring isotonic; 6 wks sub-max OKC quads 0-45 w/ gradually increasing resistance; Hip 4-way SLR Heel raises; CKC exercises; leg press; step-ups; partial lunges; squats 0-90; Balance/proprioception; CV conditioning; Core stability; Upper body exercises 5. Ice in stretch: 2nd TERT 6. HEP for 3rd TERT | RX: Recommendations: Sapega-McClure technique as needed (see previous) <p>Bike, Elliptical Runner, Stairmaster Flexibility exercises, Biofeedback Total Leg Strengthening, Hip strengthening, Heel raises, Hamstrings isotonic</p> <p>6 wks quad isotonic 0-45 8 wks quad isotonic 0-90 Isokinetic quad/hams in ROM without chondrosis CKC exercises, leg press, step-ups, lunges, squats, Balance/proprioception CV conditioning, Core stability 12 weeks add impact activities if 75% strength</p> <p>Testing: 12 wks Linea 16 wks Linea, Biodex 18-24 wks Linea, Biodex, FXN test</p> <p>Return to Work/Sport No pain or effusion Full ROM Isokinetic Strength- 90% Functional Tests - 90% MD approval Return to sports 4-6 months</p> |