



## PHYSICAL THERAPY PRESCRIPTION ACL RECONSTRUCTION & MCL RECONSTRUCTION

Name: \_\_\_\_\_ Date: \_\_\_\_\_

Post-Operative Diagnosis:  Right  Left ACL Reconstruction

Graft:  BTB  Hamstring  Allograft \_\_\_\_\_

Additional Procedures:  Lateral Meniscectomy  Medial Meniscectomy  
 Lateral Meniscal Repair  Medial Meniscal Repair

Other: MCL Reconstruction \_\_\_\_\_

Surgical Date: \_\_\_\_\_

Weight Bearing:  Progressive WBAT

Weight bearing modifications:  NWB  TTWB  PWB

NWB x 3 weeks, then 50% WB w/ crutches x 3 weeks

ROM:  Full passive knee extension, progress knee flexion as tolerated

ROM Modifications: \_\_\_\_\_

Brace Instructions: \_\_\_\_\_

Additional Instructions: \_\_\_\_\_

Frequency & Duration:  1-2 or  2-3 times per week for \_\_\_\_\_ weeks

Rx: ACL Post-Op Rehab – Phase 1 (follow my protocol strictly)  
Dressing change / wound check 2-3 days post-op  
Call my office if patient unable to get 0 – 90° ROM by 2 weeks post-op  
Emphasize early full passive extension to 0° (No recurvatum for hamstring grafts)

Precautions:

Per my PT protocol  
 Other: Protect MCL repair – no valgus or ER stress

Physician's Signature:  \_\_\_\_\_, MD



## PHYSICAL THERAPY PROTOCOL ARTHROSCOPIC ACL RECONSTRUCTION & MCL RECONSTRUCTION

### PHASE I:

**TIME FRAME:** Immediately post-op through 3 weeks  
Patient to do H.E.P. daily

**GOALS:** Passive extension to 0 only  
Reduce swelling  
90° flexion by 2 weeks post-op  
Maintain patella glide  
Achieve good quad set at 0° and 90°

**PRECAUTIONS:** Brace removal prn by therapist for exercises  
Brace locked at 0° for sleeping until 0° extension maintained  
**NWB immediately post-op.**  
Brace locked at 0° for ambulation  
Full ROM

### **EXERCISES:**

1. 0° quad sets (consider NMES or biofeedback for protocol control).
2. Assisted flexion (dangle) with uninvolved leg crossed under ankle.
3. 90° quadriceps isometrics once 90° flexion achieved.
4. Passive hyperextension (sitting) to zero ASAP.
5. Straight leg raises, all planes, with brace locked in full extension.
6. Calf, hamstring stretching, calf pumps.
7. Heel slides.



## PHYSICAL THERAPY PROTOCOL ARTHROSCOPIC ACL RECONSTRUCTION & MCL RECONSTRUCTION

### PHASE II:

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**TIME FRAME:** 3 - 6 weeks post-op.  
PT visits - TIW  
Patient to do H.E.P. daily

**GOALS:** Passive extension to zero mandatory  
**50% WB in brace and w/ crutches**  
Restore patella mobility to normal  
Achieve good quad set at 0° and 90°  
Brace until 6 weeks po  
Full ROM

**PRECAUTIONS:** Avoid terminal open chain quad PRE

#### **EXERCISES:**

1. Patella and scar tissue mobilization by therapist and patient.
2. Straight leg raises continue in brace until strength is sufficient to prevent extension lag. No SLR w/ weights
3. Isometric quad sets at 90° knee flexion (use a belt looped around leg of chair).
4. Theraband™ leg press from 100° to 0°.
5. Calf strengthening (Heel raises standing, sitting, and Theraband™).
6. Closed kinetic chain quadriceps strengthening with bands only
7. Stationary bike – progress light resistance as tolerated.



## ARTHROSCOPIC ACL RECONSTRUCTION & MCL RECONSTRUCTION

### **PHASE III:**

**TIME FRAME:** 6 weeks to 10 weeks post-op.  
PT visits - BIW  
Patient should do workout in health club or home gym TIW

**GOALS:** **Progress to WBAT**  
Regain full motion to flexion.  
Restore patella mobility to normal.  
Begin improving proprioception.  
Normal community ambulation.  
Increasing strength with program in therapy and / or club.

**PRECAUTIONS:** Avoid terminal open chain quad PRE  
No jumping or cutting activities

### **EXERCISES:**

1. Continue Range of motion / flexibility to equal opposite side
2. Continue closed kinetic chain quad strengthening and progress to single leg mini squats (pt may use weighted back pack), single/ double leg press, wall sits to 90°, step-ups, lateral step-up, and weighted terminal knee extension.
3. Continue to progress hamstring, calf, and hip strengthening (side steps, resisted walking, raises, curls).
4. Stationary bike – increase time and resistance levels. Progress to interval program.
5. Elliptical, Nordic Trac, Stairmaster, treadmill machines and walking for conditioning with attention paid to patella symptoms.
6. Pool programs – walking initially with progression to deep-water aqua jogging.
7. Continue to progress proprioception and balance activities (ball toss, balance boards, foam, and mini trampoline).
8. Open chain knee extension from 100° to 145°
9. Isometric quad sets at 90° knee flexion – sitting and supine (ie. Hip flexed and neutral).



**PHASE IV:**

- TIME FRAME:** 10 weeks to 20 weeks post-op.  
PT visits - QOW  
Patient should do workout in health club or home gym 5x/week
- GOALS:** Full ROM  
Normal patella mobility.  
Gain sufficient strength, proprioception to initiate straight jogging.  
If swelling limits flexion – pt to take 2 Aleve PO BID.
- PRECAUTIONS:** No sudden starts / stops or quick change in direction.  
No jumping or cutting activities
- EXERCISES:**
1. Continue strength building program by increasing weights and decreasing repetitions per set, 3-4 times per week.
  2. Progress toward full weight-bearing jog at 12 weeks. Begin on treadmill and advance to track (initially walking curves). Slowly increase the pace and distance.
  3. Advanced proprioception activities.
  4. Isokinetic strengthening full range of motion if available.
  5. Open chain knee extension 30° to 0°.

**PHASE V:**

- TIME FRAME:** Quadriceps/hamstring strength 80% of uninjured thigh required for phase V.  
20 weeks to 24 weeks post-op.  
PT visits - QOW  
Patient should do workout in health club or home gym 5x/week.
- GOALS:** Restore advanced proprioception  
Restore normal muscle strength and endurance  
Safely restore functional sports performance in controlled setting.  
Slow and controlled cutting activities under light load.
- PRECAUTIONS:** Quadriceps/hamstring strength 80% of uninjured thigh required for phase V.  
No fast or aggressive cutting  
No hopping down from > 12" height
- EXERCISES:**
1. 4 week return to sports program/ agility program issued by therapist / physician.
  2. Slow progression into plyometric training.
  3. Cross overs
  4. Figure 8 running.
  5. Box / shuttle running
  6. Accelerating / decelerating sprints
  7. Progression into sport specific drills.

**PHYSICAL THERAPY PROTOCOL  
ARTHROSCOPIC ACL RECONSTRUCTION & MCL RECONSTRUCTION**



**PHASE VI:**

**TIME FRAME:** Quadiceps/hamstring strength 85% of uninvolved thigh required for phase VI.  
Begin 6 months post-op.  
Supervised but independent program

**GOALS:** Equal performance lower extremities on single and 3 hop test  
Symmetric performance of basic and sport specific agility drills.  
Return to sports.

**IF QUESTIONS: PLEASE CALL [469-800-7200](tel:469-800-7200)**