4500 San Pablo Rd S, Jacksonville, FL, 32224

Ph: 904-953-2496 | Fax: 904-953-2005

<u>Medial Patellofemoral Ligament Reconstruction + Tibial Tubercle Osteotomy</u>

Phase	Goals	Precautions / Restrictions	Treatment
Weeks 0 – 6	 Manage swelling and pain Achieve quadriceps / hamstring / glute activation Symmetric extension by week 2 Moderate knee irritability (wk. 0-2) Swelling is improving < 5 / 10 pain Low knee irritability (wks. 2 - 6) Minimal swelling with activities < 2 / 10 pain 	 Toe Touch Weight Bearing (Heel to flat) Weeks 0 - 6 TWB Locked in extension while WB Ambulate with crutches and brace ROM restrictions: 0 - 90° knee flex AAROM to AROM PASSIVE knee extension only 	 PRICE Quadriceps/hamstring, glute activation should be emphasized Ankle: range of motion and strength Cryotherapy/Modalities as indicated Initial visit: FOTO, LEFS, PRO OKC strengthening: Hip: all planes of motion Ankle: all planes of motion Week 6: FOTO, LEFS, PRO
Weeks 6 – 8	 Discontinue knee immobilizer with adequate quadriceps control Full AROM by 8 weeks Restore strength of quadriceps, hamstrings, hips Normalize gait 	 Progress to WBAT beginning at wk. 6 pending x-ray and MD visit; wean from crutches as able D/C brace w/ adequate quad Avoid excessive loading of anterior knee (no PF pain) No impact (run, cutting, pivoting) 	 Begin active knee extension as tolerated Normalize gait Initiate CKC exercises Stationary bike Cryotherapy / Modalities as indicated Week 8: FOTO, LEFS, PRO
Weeks 8 – 12	 Ambulate community distances by 12 weeks without assistive devices No effusion in knee Restore total leg strength 	 Avoid loaded ROM (> 90°) No impact (running, cutting, pivoting) 	 Progress CKC into greater ROM (<90°), single leg, multi-planar, and with resistance as tolerated Initiate proprioceptive training Initiate pool if accessible Week 12: FOTO, LEFS, PRO Can begin medial/lateral patellar mobilizations
Weeks 12 – 16 (Months 3 – 4)	 Preparation for more advanced exercise / activity Normalize asymmetries 70% symmetry with isokinetic quad strength testing 	 Avoid loaded range of motion (>90°) Proper exercise form and control during exercise performance No impact (running, cutting, pivoting) 	 Progress strength, endurance, and proprioception Advance cardiovascular conditioning (Elliptical) Week 16: SGYM with testing OKC strengthening: Y - Balance Body weight single leg press Humac testing (90/180 deg/sec) FOTO, LEFS, PRO
Weeks 16 + (Month 4+)	 Begin impact training once cleared by MD (jumping, running etc.) Avoid cutting, pivoting until week 20 Unrestricted return to activity (Months 6-9) 	 Avoid running / jumping on a painful or swollen knee Avoid cutting, pivoting, and high intensity plyometrics until wk. 20 Proper form and control during exercise performance 	 Can begin loading beyond 90° as tolerated Can begin linear jogging and light impact Anticipated final visit: SGYM with Testing Y- balance Humac testing (90/180 deg/sec) Single leg vertical jump Single leg hops: for distance, triple hop FOTO, LEFS, PRO

This protocol is not meant to be prescriptive but a recommendation to guide the rehabilitation process.

Each patient's progress may vary based on specifics of their injury and procedure.

