TROPICAL MEDICAL GROUP

Dx: ☐ Right ☐ Left

Patient Name: _____

Date of Surgery: _____

PT/OT: Evaluate and treat. Follow the following protocol.

Signature/Date: _____

888-9-TROPICAL www.TropicalMedicalGroup.com

The intent of this protocol is to provide the therapist and patient with guidelines for the post-operative rehabilitation course after PCL reconstruction. This protocol is based on a review of the best available scientific studies regarding knee rehabilitation. It is by no means intended to serve as a substitute for one's clinical decision making regarding the progression of a patient's post-operative course. It should serve as a guideline based on the individual's physical exam/findings, progress to date, and the absence of post-operative complications. If the therapist requires assistance in the progression of a post-operative patient they should consult with your surgeon. **Progression to the next phase based on Clinical Criteria and/or Timeframes as appropriate.**

Phase I – Immediate Post Surgical (Weeks 1-4)

Weeks 0 to 4: Protective Phase

Brace: Braced in full extension

Weight Bearing: Touch down to 40%

ROM Goals:

Extension: Full with posterior leg supported at all times to protect from tibial sag
Flexion: 60 degrees

Therapeutic Exercise:

Strengthening: Quadriceps setting
Three-way leg raises in brace (not flexion)
Functional quadriceps electric stimulation
****No open chain hamstring strengthening**

Manual Therapy: Patella and joint mobilization
Passive knee flexion to 60 degrees with anterior tibial force
Peri-patellar soft tissue mobilization

Cryotherapy: Six to eight times a day for 20 minutes.

Phase II – Early Strengthening Phase (Weeks 5-8)

Brace: Open to 30 degrees weeks 5 and 6; open to 60 degrees week 7,8.

Weight Bearing: Progress to full by week 8

ROM Goals:

Extension: Full
Flexion: 90 degrees week 6, progressing to 110 degrees by week 8

Strengthening: Quadriceps setting
Four-way Straight leg raising in brace.
Mini squats weeks 7,8
Step downs weeks 7,8
****No open chain hamstring strengthening**.

Proprioception: One leg balance
Core: Abdominal and lumbar exercises

Manual Therapy:
Patella and joint mobilization
Passive knee flexion to 90 degrees **with anterior tibial force.
Peri-patellar soft tissue mobilization
Prone quadriceps stretching to 90 degrees

Phase III – Advanced Strengthening Phase (Weeks 9-12)

Brace: Open

Weight Bearing: Full

ROM Goals: **Extension:** Full
Flexion: Progress to full

Strengthening: Quadriceps setting
Four-way Straight leg raising in brace
Half squats weeks
Step downs weeks
Slow progression of multi-plane closed chain activities.
****No open chain hamstring strengthening**

Proprioception: Wobble and BAPS boards
Core: Standing trunk activities
Conditioning: UBE

Manual Therapy:
Patellar mobilization
Passive knee flexion to 125 degrees with anterior tibial force
Peri-patellar soft tissue mobilization
Prone quadriceps stretching to 125 degrees
Soft tissue flexibility maintenance

Phase IV – Functional Training & Return to Sports Phase (Weeks 12 Plus)

Brace: Functional brace worn

Strengthening: Sport specific activities begun **at 9 months** Progression of multi-plane closed chain activities

Conditioning: Running straight at 6 months

Proprioception: Single leg activities

Advanced Core Strengthening: Functional standing trunk activities

Note: Return to sport based on provider team input and appropriate testing. The patient is typically allowed to return to full activities 9 to 12 months after surgery, depending on individual demands of daily activity, sports requirements, and the progression of physical therapy.

Note: Patients are progressed slowly through passive flexion exercises in the early postoperative period, and in most cases, regain full flexion in 5 to 7 months.

Note: Hamstring exercises must be delayed for 4 months, as they place excessive posterior loads on the tibia during the early stages of graft healing