

REHABILITATION GUIDELINES ACL PREHAB

PHASE I 0-6 WEEKS

DATES:

Appointments	Physical therapy 1-2 x per week with emphasis on HEP
Rehabilitation Goals	- Patient Education (surgical procedure, protocol, prognosis) - Decrease swelling/effusion of involved side - Improve ROM (0-120) - Maintain/improve neuromuscular control and coordination - Improve hip, knee and ankle stability - Quad control - Normalize Gait - Prevent atrophy/maintain strength of both limbs
Precautions	- Possible brace with ambulation - Avoid pivoting or high impact activity - Avoiding open chain exercises with excessive anterior tibial translation - Use Soreness Rules in guiding prehab activity
Suggested Therapeutic Exercises	- Introduce Post-op exercises & Crutch training, - Quad sets, Straight Leg Raise (all planes), Single Leg Balance - Heel slides/Wall Slides, Ball Rolling, Bridges - Brace fitting (video) - Flexibility Training: Quad, hamstring, adductors, calf, ITB stretching - Functional Exercises/Resistance training - Squats, Deadlifts, Lunges, Step Ups - Gait Training - Movement and Coordination Skills (Wall drills, A-March) - Single leg and Core conditioning for uninvolved limb to prevent deconditioning
Cardiovascular Exercises	Cycling (flat pedals or loose clips), walking, UBE
Progression Criteria	- Quad Control (SLR without a lag, good quad set initiation and endurance) - Minimal Effusion (Stroke Test <1+) - ROM 0-120 - Normalize Gait

References: USSA Return to Snow Protocol; University of Delaware
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