# REHABILITATION GUIDELINES FOR MEDIAL PATELLOFEMORAL LIGAMENT RECONSTRUCTION

## PHASE I (0-2 WEEKS)

### Appointments
- Physical therapy 2 x/week
  - MD visit at 7-10 days post op for stitch removal

### Rehabilitation Goals
- Restore full passive knee extension
- Diminish joint swelling and pain
- Gradually improve knee flexion
- Re-establish quad control

### Precautions
**WB:**
- WBAT two crutches

**Brace:**
- Locked at 0 for ambulation, otherwise 0-30 degrees flexion
- Sleep with brace locked in full extension
- PROM 0-30 degrees flexion
- Soft tissue mobilization of distal ITB, lateral retinaculum
- Swelling control measures
- Patellar mobilizations: avoid lateral glides

### Suggested Therapeutic Exercises
- Ankle pumps
- Knee extension overpressure
- AROM and PROM for flexion for 30 degrees
- Quad sets
- Prone extension hang
- Weight shifting (brace locked)
- Heel raises (brace locked)
- NMES for quad sets to diminish inhibition

### Cardiovascular Exercises
- No lower extremity cardio at this time

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# REHABILITATION GUIDELINES FOR MEDIAL PATELLOFEMORAL LIGAMENT RECONSTRUCTION

## Progression Criteria
- Full passive knee extension
- Knee flexion 0-30

## PHASE II (2-6 WEEKS) DATES:

### Appointments
- Continue physical therapy 2 x/week
  - MD visit at 6 weeks post op

### Rehabilitation Goals
- Full passive knee extension
- Full active quad contraction with superior patellar glide
- Gradually improve knee flexion
- Patient is able to tolerate FWB with brace locked at 0 degrees without pain

### Precautions
**Brace:**
- After post op MD visit and sutures are out:
- Locked at 0 for ambulation and weight bearing exercises; otherwise 0-90 degrees flexion
- AROM/PROM 0-90 degrees flexion
- continued emphasis on extension
- **Continue avoiding lateral glides**

### Suggested Therapeutic Exercises
- Continue with above exercises
- Continue with NMES if needed
- Heel slides to 90 degrees flexion
- ITB stretching
- Single leg balance locked in brace, heel raises locked in brace
- 4 way SLR (flexion, adduction, abduction, extension)
- Bridges with feet on ball

### Cardiovascular Exercises
- No lower extremity cardio at this time

### Progression Criteria
- Full passive knee extension
- Full active quad contraction with superior patellar glide
- Gradually improve knee flexion
- Patient is able to tolerate FWB brace locked at 0 degrees without pain
# Rehabilitation Guidelines for Medial Patellofemoral Ligament Reconstruction

## Phase III (6-12 Weeks)

<table>
<thead>
<tr>
<th>Appointments</th>
<th>Dates:</th>
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<tbody>
<tr>
<td>Continue physical therapy 2 x/week</td>
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<tr>
<td>• MD visit at 12 weeks post op</td>
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<table>
<thead>
<tr>
<th>Rehabilitation Goals</th>
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<tbody>
<tr>
<td>• Restore full knee ROM</td>
<td></td>
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<tr>
<td>• Wean off of crutches and brace</td>
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<tr>
<td>• Restore normal gait pattern</td>
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<tr>
<td>• Gradually improve ADLs and strength</td>
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<thead>
<tr>
<th>Precautions</th>
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<tbody>
<tr>
<td>• Bike to start strengthening and improve ROM, gradually lower seat as ROM allows</td>
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<table>
<thead>
<tr>
<th>Suggested Therapeutic Exercises</th>
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<tbody>
<tr>
<td>• Mini squats and lunges</td>
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<tr>
<td>• Hamstring curls with light weights</td>
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<tr>
<td>• Heel raises</td>
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<tr>
<td>• Step ups/lateral step downs</td>
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<tr>
<td>• Single leg balance</td>
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<tr>
<td>• Lateral steps</td>
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<table>
<thead>
<tr>
<th>Cardiovascular Exercises</th>
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<tbody>
<tr>
<td>• Stationary bike</td>
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<tr>
<td>• Walking</td>
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<table>
<thead>
<tr>
<th>Progression Criteria</th>
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<tbody>
<tr>
<td>• Full knee ROM</td>
<td></td>
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<tr>
<td>• Normal gait pattern without assistive device</td>
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<tr>
<td>• Improving functional strength</td>
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</table>

## Phase IV (12-18 Weeks)

<table>
<thead>
<tr>
<th>Appointments</th>
<th>Dates:</th>
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<tbody>
<tr>
<td>Continue physical therapy 1-2 x/week</td>
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<table>
<thead>
<tr>
<th>Rehabilitation Goals</th>
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<tbody>
<tr>
<td>• Full ROM</td>
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<tr>
<td>• Normal patellofemoral mobility</td>
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<tr>
<td>• Patient demonstrates normal mechanics with CKC exercises</td>
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</tbody>
</table>
### Precautions
- None at this time

### Suggested Therapeutic Exercises
- Controlled sports start such as jogging inline
- Continue with above exercises and progress with proprioception and agility, leg press, leg curls, deadlifts, core strength
- Can start more sport specific training at 4 months

### Cardiovascular Exercises
- Bike
- Inline jogging

### Progression Criteria
- Return to sport at 6 months if:
  - Quadriceps and hamstring strength at least 90% of unaffected leg
  - Able to return to sport per return to sport test

### References:

PT Name and Date: Ariel Duvall 2/2/2016

MD Name and Date: Approved by MD 2/2/2016