



## Proximal or Distal Realignment +/- Medial Patellofemoral Ligament Reconstruction Rehabilitation Program

**Name:** \_\_\_\_\_

**Date:** \_\_\_\_\_

**Diagnosis:** \_\_\_\_\_

**Date of Surgery:** \_\_\_\_\_

### Phase I – Immediate Postoperative Phase (Day 1–5)

- Goals:
  - Diminish swelling/inflammation (control hemarthrosis)
  - Diminish postoperative pain
  - Initiate voluntary quadriceps control
  - Independent ambulation
- Brace:
  - Brace for ambulation only (POD 1 to Week 6)
- Weight-bearing
  - Toe touch weightbearing (Week 1-4)
- Swelling/Inflammation Control
  - Cryotherapy
  - Compression bandages
  - Elevation & ankle pumps
- Range of Motion
  - Full passive knee extension
  - Flexion to 45° (day 1-4)
  - Flexion to 60° (day 5)
  - PROM and gentle AAROM only
  - CPM machine set at 30 degrees. The machine should be used 6 hours per day (2 hours in the morning, 2 hours in the afternoon, and 2 hours in the evening). Use for 1 month after surgery. Do not wear leg brace or cooling device while using CPM machine.
- Flexibility
  - Hamstring and calf stretches
  - PROM/AAROM within ROM limitations

### Phase II – Acute Phase (Week 2–4)

- Goals:
  - Control swelling and pain
  - Promote healing of realignment tibial tuberosity
  - Quadriceps strengthening
- Brace
  - Continue brace for ambulation only
- Weight-bearing
  - Continue toe touch weightbearing
- Swelling/inflammation
  - Continue use of cryotherapy
  - Compression bandage
  - Elevation
- Range of motion
  - PROM/AAROM exercises
  - ROM 0–75° (week 1–3)
  - ROM 0–90° (week 4)



- Electrical muscle stimulation to quads
- Quad setting isometrics
- Straight leg raises (flexion)
- Hip adduction/abduction
- Hip extension
- GENTLE submaximal isometric knee extension
- Week 4
  - Light leg press
  - Vertical squats (no weight)
- Flexibility
  - Continue hamstring, calf stretches



**Phase III –Subacute Phase “Motion” Phase (Week 5–8)**

- Goals
  - Gradual improvement in ROM
  - Improve muscular strength and endurance
  - Control forces on extension mechanism
- Weight-bearing
  - Progress to full weightbearing (week 5-6)
  - One crutch (week 4-6)
  - Discontinue crutch (week 6)
- Range of motion
  - PROM 0-115°
  - PROM 0-125°
  - PROM 0-125/135°
- Exercises
  - Continue electrical muscle stimulation to quadriceps
  - Quadriceps setting isometric
  - Hip adduction, abduction, and extension
  - Vertical squats
  - Leg press
  - Knee extension light (0-60°)
  - Bicycle (week 6-8)
  - Pool program [walking, strengthening (when able)]
- Flexibility
  - Continue all stretching exercises for LE



**Phase IV –Strengthening Phase (weeks 9-16)**

- **Criteria to Progress to Phase IV**
  - ROM at least 0-115 degrees
  - Absence of swelling/inflammation
  - Voluntary control of quads
- Goals
  - Gradual improvement of muscular strength
  - Functional activities/drills
- Exercises
  - ½ vertical squats (0-60°)
  - Wall squats (0-60°)
  - Leg press
  - Forward lunges
  - Lateral lunges



- Hip adduction/abduction
- Bicycle
- Stairmaster

**Phase V –Return to Activity Phase**

- **Criteria to enter Phase V**
  - Full non-painful ROM
  - Appropriate strength level (80% or greater of contralateral leg)
  - Satisfactory clinical exam
- **Goals**
  - Functional return to specific drills
- **Exercises**
  - Functional drills
  - Strengthening exercises
  - Flexibility exercises

**Comments:**

**Frequency:** \_\_\_\_ times per week

**Duration:** \_\_\_\_ weeks

**Signature:** \_\_\_\_\_

**Date:** \_\_\_\_\_