

# 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:		
o Diminish swelling/inflammation (controlhemar	throsis)	
<ul> <li>Diminish postoperative pain</li> </ul>	,	
o Initiate voluntary quadriceps control		
o Independent ambulation		
• Brace:		
<ul> <li>Brace for ambulation only (POD 1 to Week 6)</li> </ul>		
<ul> <li>Weight-bearing</li> </ul>		
<ul> <li>Toe touch weightbearing (Week 1-4)</li> </ul>		
Swelling/Inflammation Control		
o Cryotherapy		
<ul> <li>Compression bandages</li> </ul>		
o Elevation & ankle pumps		
Range of Motion		
<ul> <li>Full passive knee extension</li> </ul>		
○ Flexion to 45° (day 1-4)		
<ul> <li>Flexion to 60° (day 5)</li> </ul>		
<ul> <li>PROM and gentle AAROM only</li> </ul>		
<ul> <li>Flexibility</li> </ul>		
<ul> <li>Hamstring and calfstretches</li> </ul>		
<ul> <li>PROM/AAROM within ROM limitations</li> </ul>		
Phase II -Acute Phase (Week 2-4)		
• Goals:		
<ul> <li>Control swelling and pain</li> </ul>		
<ul> <li>Promote healing of realignment tibial tuberosity</li> </ul>		
<ul> <li>Quadriceps strengthening</li> </ul>		
• Brace		
<ul> <li>Continue brace for ambulation only</li> </ul>		
<ul> <li>Weight-bearing</li> </ul>		
<ul> <li>Continue toe touch weightbearing</li> </ul>		
<ul> <li>Swelling/inflammation</li> </ul>		
<ul> <li>Continue use of cryotherapy</li> </ul>		
<ul> <li>Compression bandage</li> </ul>		
o Elevation		
<ul> <li>Range of motion</li> </ul>		
<ul> <li>PROM/AAROM exercises</li> </ul>		

ROM 0-75° (week 1-3)ROM 0-90° (week 4)

o Electrical muscle stimulation to quads

Muscle Retraining

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- o Quad setting isometrics
- Straight leg raises (flexion)
- o Hip adduction/abduction
- Hip extension
- o GENTLE submaximal isometric knee extension
- Week 4
  - ■■ Light leg press
  - •• Vertical squats (no weight)
- Flexibility
  - o Continue hamstring, calfstretches

# Phase III -Subacute Phase "Motion" Phase (Week 5-8)

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

## Phase IV -Strengthening Phase (weeks 9-16)

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



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- Hip adduction/abductionBicycle
- o Stairmaster

Phase V -Return to Activity Ph	ase
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- Criteria to enter Phase V
  - o Full non-painful ROM
  - o Appropriate strength level (80% or greater of contralateral leg)
  - o Satisfactory clinical exam
- Goals
  - o Functional return to specific drills
- Exercises
  - o Functional drills
  - $\circ \quad Strengthening \, exercises \,$
  - o Flexibility exercises

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Frequency: times per week	Duration:weeks
Signature:	Date: