



From the office of:
Andrew J Blackman, MD
Bone & Joint Specialists of Chesterfield
121 St Luke's Center Drive, Suite 302
Chesterfield, MO 63017
(p) 314-523-2595 (f) 314-590-5947

Medial Patellofemoral Ligament Reconstruction Physical Therapy Protocol

I. Weeks 0-2:

- a. Restrictions:
 - i. Knee brace must be on at all times when walking.
 - 1. Locked at 30 degrees flexion
 - ii. Toe-touch weight bearing
 - iii. Avoid valgus stress to knee.
- b. Goals:
 - i. Active flexion, passive extension ROM: 0-90 degree maximum.
 - ii. Reduce muscle atrophy.
 - iii. Reduce swelling.
- c. Exercise examples:
 - i. Quad and hamstring sets.
 - ii. Gluteal sets.
 - iii. Hip belt abduction isometrics.
 - iv. Pillow adductor squeezes.
 - v. Crunches.
 - vi. Ankle dorsiflexion/plantar flexion isometrics or Theraband strengthening.
 - vii. Cryotherapy multiple times during the day.

II. Weeks 2 to 6:

- a. Restrictions:
 - i. Avoid valgus stress to knee.
 - ii. Knee brace locked in extension for weight bearing
 - 1. OK to remove or unlock for non-weight bearing activities
- b. Goals:
 - i. Full weight bearing by six weeks without crutches
 - ii. Progress to full ROM by eight weeks after surgery
 - iii. Reduce pain.
 - 1. Electrical stimulation.
 - 2. Soft tissue mobilizations and myofascial release.
 - iv. Reduce effusion.
 - v. Minimize hip, core and lower extremity atrophy.
- c. Exercise examples:

- i. Isometric leg press with angle no greater than 85 degrees of knee flexion.
- ii. Straight leg raises in all planes of motion.
- iii. Clam.
- iv. Prone plank.
- v. Crunches.
- vi. Ankle Theraband in all planes.
- vii. Seated upper body strengthening.

III. Weeks 6 to 8:

- a. Restrictions:
 - i. Avoid valgus stress.
 - ii. Avoid any patellofemoral pain with exercise program.
 - iii. Lateral J brace is worn at all times when walking and exercising.
- b. Goals:
 - i. Full active range of motion of the involved knee at 8 weeks post-op.
 - ii. No effusion.
 - iii. Improved core and hip strength and endurance.
- c. Exercises:
 - i. Maximize core, hip and lower extremity strength in all planes of motion.
 - ii. Maximize knee, hip and ankle mobility.

IV. Weeks 8 to 12:

- a. Restrictions:
 - i. Avoid valgus stress to involved knee/lower extremity during training and activities of daily living.
- b. Goals:
 - i. Maximize core, hip and lower extremity strength in all planes of motion.
- c. Exercises:
 - i. Begin stationary bike.
 - ii. Continue to maximize core, hip, lower extremity mobility and stability programs.

V. Months 3 to 4:

- a. Restrictions:
 - i. Continue to maintain proper hip, knee and foot alignment during training and activities.
 - ii. OK to remove brace for daily walking; wear brace for sports and other high demand activities
- b. Goals:
 - i. Begin to lay the foundation for return to sport.

- c. Exercises:
 - i. Initiate sport specific drills.
 - ii. Advance core, hip, lower extremity mobility and stability exercises.
 - iii. Advance aerobic and anaerobic energy systems by use of non-impact conditioning such as bike and elliptical trainer.

VI. Months 4-6:

- a. Restrictions:
 - i. Continue to maintain proper hip, knee and foot alignment during training and activities.
- b. Goals:
 - i. Full, unrestricted return to play.
- c. Exercises:
 - i. Advance core, hip, lower extremity mobility and stability exercises.
 - ii. Advance to appropriate plyometric exercises for the individual's sport or occupation.
 - iii. Advance aerobic and anaerobic energy systems by use of non-impact conditioning such as bike and elliptical trainer.