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ACLR with a patellar tendon autograft + meniscus repair Rehabilitation Protocol

PHASE	WEIGHT BEARING	BRACE	ROM	THERAPEUTIC EXERCISE
PHASE 1 0-4 WEEKS	0-4 wks: Non-weight bearing with crutches & brace	Extension brace at 0 degrees (remove for hygiene/exercise)	0-4 wks: PROM 0-90°	0-4 wks: Heel slides, patellar mobs, gastro/soleus stretch in a supine position, quad sets, SLR with brace in full extension to prevent extension lag
PHASE 2 4 - 8 WEEKS	4-6 wks: Weight bearing as tolerated with crutches & brace	Extension brace at 0 degrees. Gradually discontinue crutches and brace when patient is able to perform SLR with no extension lag	4-8 weeks: Maintain full extension. Progress flexion beyond 90°, weight bearing ROM 0-90°	4-8 wks: Progressive to weight bearing exercises: begin toe & calf raises, partial wall sits, closed chain extension, Squats (0-90degrees), balance exercises, hamstring curls and stationary bike
PHASE 3 8 WEEKS to 4 MONTHS	Full without crutches and brace	None	Gain full and pain-free ROM	Closed-chain exercises beyond 90 degrees. Advance closed chain strengthening, progress proprioception activities, begin stairmaster/nordic Trac. Running start after 4 months
PHASE 4 4-6 MONTHS	Full	None	Full and pain-free	Progress flexibility/strengthening progression of function: forward/backward running, cutting, grapevine etc, initiate plyometric program and sports-specific drills
PHASE 5 6 MONTHS and beyond	Full	None	Full and pain-free	Gradual return to sports participation, maintenance program for strength and endurance. Return to sport testing after 6 months

- * Patients should start physiotherapy between 3-5 days after surgery with twice a week visit for the first 6 weeks and then once a week after
- ** Patients should avoid tibial rotation for 4-6 weeks
- *** Brace may be removed for showering, icing and physiotherapy exercises.