

## ACLR with a patellar tendon autograft +/- partial meniscectomy Rehabilitation Protocol

PHASE	WEIGHT BEARING	BRACE	ROM	THERAPEUTIC EXERCISE
<b>PHASE 1 0-2 WEEKS</b>	0-2 wks: as tolerated with crutches and brace	Extension brace at 0 degrees (remove for hygiene/exercise)	0-2 wks: as tolerated	Heel slides, patellar mobs, gastro/soleus stretch in a supine position, quad/hamstring sets, SLR with brace in full extension until quad strength prevents extension lag
<b>PHASE 2 2 - 6 WEEKS</b>	2-4 wks: Gradually discontinue crutches and brace when patient is able to perform SLR with no extension lag	2-4 wks: Gradually discontinue crutches and brace when patient is able to perform SLR with no extension lag	2-6 wks: Maintain full extension and progressive flexion	Progressive to weight bearing gastro/soleus stretch, begin toe raises, closed chain extension, balance exercises, hamstring curls and stationary bike
<b>PHASE 3 6 WEEKS - 4 MONTHS</b>	Full without use of crutches and brace in a normalized gait pattern	None	Gain full and pain-free ROM	Advance closed chain strengthening, progress proprioception activities, begin stairmaster/nordic Trac. Running start ahead after 12 weeks
<b>PHASE 4 4-6 MONTHS</b>	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
<b>PHASE 5 6 MONTHS and beyond</b>	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.