



MEDIAL PATELLOFEMORAL LIGAMENT REPAIR AND RECONSTRUCTION REHAB PROTOCOL

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SURGERY TO 6 WEEKS.

- physical therapy 1 x per week
- protect surgical site
- restore knee ROM
- normalize gait
- manage post operative edema
- restore quad control

Precautions:

- brace locked in extension
- WBAT crutches as needed with brace on
- ROM limitations 0-90 degrees.

Therapeutic Exercises:

- Quad sets
- 4 way leg lifts with brace on for hip strengthening
- Ankle theraband.

7-11 WEEKS POST OP.

- Physical therapy 1-2 x per week
- Goal of protective quad control

Precautions:

- use a lateral buttress knee sleeve for all activities
- begin gentle bilateral closed chain strengthening with shallow arc of motion (0-45 degrees)

Therapeutic Exercises:

- functional single plane closed chain movements, double leg press, mini squats
- balance and proprioception exercises
- continued progression of ROM
- stationary bike
- hip and core strengthening
- Avoid valgus or medial knee positioning.

Progression Criteria:

- Normal gait on level
- Good leg control without pain, apprehension or lag
- Single leg stand greater than 15 seconds.

12-14 WEEKS POST OP

- continue physical therapy 1-2 x per week
- Goals of full ROM, no effusion, improved quad, hip and core strength, improved balance.

Precautions:

- avoid closed chain exercises with knee flexion over 90 degrees to minimize overstrengthening
- Surgical repair.
- Avoid post activity swelling



Therapeutic exercises:

- continue ROM
- stationary bike
- Single leg press to 90 degrees.
- Stretching for patient specific imbalances
- Initiate low amplitude agility drills in sagittal plane – avoid frontal and transverse initially due to potential for dynamic valgus

Progression Criteria:

- full ROM
- no effusion
- Single leg balance with 30 degrees of knee flexion for 15 seconds.
- Good alignment and no pain with squats and lunges.

15-18 WEEKS POST OP

- continue therapy once every 2 – 3 weeks
- Goals of good eccentric and concentric multi-plane dynamic neuromuscular control to consider return to work/sports.

Precautions:

- Post-activity soreness should resolve within 24 hrs.
- no swelling after activity

Therapeutic exercises:

- Impact control exercises beginning 2 feet to 2 feet, progressing to 1 foot to the other then 1 foot to the same.
- Movement control exercises begin low velocity single plane to higher velocity multi-plane.
- Sport /work specific exercises.
- Continue hip and core strengthening