

PHYSICAL THERAPY PROTOCOL ACL RECONSTRUCTION

Weeks 0-4

Weightbearing: As tolerated with crutches, goal of discontinuing crutches by 10 days

Hinged Knee Brace: Locked in extension for ambulation and sleeping, removed for PT
- Unlocked for ambulation and removed while sleeping (Weeks 2-4)

Range of Motion: AROM/AAROM/PROM – Goal of 0-120 degrees under watch and guidance of PT by 4 weeks, sometimes can take 6 weeks

Therapeutic Exercises: soft tissue mobilization to anterior knee, patellar mobilization, electric stimulation as necessary for quad control, quad sets, leg lifts in standing with brace on for balance and hip strength, straight leg raise with brace locked until quad strength prevents extension lag

Progression Criteria: pain-free weight bearing, mild to no effusion

Weeks 4-6

Weightbearing: As tolerated discontinue crutch use

Hinged Knee Brace: Discontinue use once full extension with no lag is achieved

Range of Motion: AROM/AAROM/PROM – Goal of 0-130 degrees under watch and guidance of PT; work on progressive knee flexion

Therapeutic Exercises: soft tissue mobilization, patellar mobilizations, quad and hamstring sets, closed chain exercises, hamstring curls, toe rises, heel slides/ wall slides actively, gait drills, balance drills; hip and core strengthening; begin to use stationary bicycle

Progression Criteria: Normal gait on all surfaces, ability to carry out functional movements without pain demonstrating good leg control, single leg stance greater than 15 seconds, full ROM

Weeks 6-16

Rehabilitation Goals: single leg control; good control and no pain with functional movements

Therapeutic Exercises: Advance closed chain (progressing to multi-plane exercises), non-impact balance and proprioceptive drills, hip and core strengthening.

Stairmaster and Elliptical beginning at 8 weeks. **Straight ahead running at 12 weeks**

Progression Criteria: Single leg stance greater than 30 seconds, ability to carry out multi-plane functional movements without unloading affected leg or pain and demonstrating good control

Weeks 16-24 (Months 4-6)

Rehabilitation Goals: Good dynamic neuromuscular control and no pain with multiplanar activities; functional sports specific progression

Therapeutic Exercises: Sport specific activities on an individual basis

Jumping at 16 weeks; Sprinting/cutting/pivoting at 20 weeks

Months 6+

Sport specific strength and conditioning

Individual recommendations regarding return to sport based on functional assessment