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ACL and PLC Reconstruction Postoperative Rehabilitation Protocol

Phase 1: 0-6 Weeks (Protection Phase)—NWB, ROM 0-90

- Weightbearing: Toe-touch weightbearing with crutches
- **Hinged Knee Brace:** worn for 6 weeks post-op
 - o Locked in full extension for all times except exercises/hygiene
- Range of Motion: 0-90° AAROM → AROM as tolerated
- Therapeutic Exercises:
 - o Patella mobilization
 - o Straight leg raise supine with brace locked at 0 degrees, Quad Sets
 - Ankle Pumps
 - o Short crank (90mm) ergometry
 - No abduction of hip or leg
 - o Avoid tibial rotation, hyperextension and varus force to knee

Phase 2: 6-12 Weeks (Recovery Phase)—Gradual Weightbearing, Achieve Full ROM

- **Weightbearing:** Gradual weightbearing (25% PWB, 50%, 100% with brace, WBAT)
- **Hinged Knee Brace:** Gradually wean off—start by ambulating with unlocked, then discontinue
- Range of Motion: Work towards full, smooth ROM
- Therapeutic Exercises:
 - o Continue above
 - Gentle hip abduction with no resistance below knee
 - o Wall-sits 0-45
 - Mini-squats with support 0-45
 - Carpet drags (not with PCL reconstruction!!)
 - Pool therapy
 - o Treadmill walking by 8 weeks

Phase 3: 3-6 months (Reintegration Phase)—Strengthening

- **Weightbearing**: Full Weightbearing, no brace
- Range of Motion: Full, painless ROM
- Therapeutic Exercises:
 - Slide boards
 - Begin agility drills
 - o Figure 8's

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- o Gentle loops
- o Large zig-zags
- o Swimming
- o Begin plyometrics at 4 months

Phase 4: 6-10 months (Return to Sports)—Gradual Return to Activity

- Weightbearing: Full Weightbearing, no brace
- Range of Motion: Full, painless ROM
- Therapeutic Exercises:
 - o Begin running at 6 months
 - o Advance Sports-Specific Agility Drills
 - Start Plyometric program
- Gradual return to sport/athletic activity (MD directed)
 - O Typically, 10-12 months

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