



ATTENTION PHYSICAL THERAPISTS—STRESS IMPORTANCE OF THE FOLLOWING:

- Place patient in brown compression stocking (20-30 mmHg) at first PT appointment. Wear during daytime only and d/c at night—instruct patient/family member how to don/doff stocking
 - May discharge when no swelling or effusion- typically 3-4 weeks p/o
- Stress early knee extension. Should reach full knee ext by 2 weeks post-op.
- Stress no pillows under popliteal fossa. Always under calf/heel only to progress knee extension.
- All multi-ligament reconstructions on ASA 325 p/o daily X2 weeks unless contraindicated (i.e. Coumadin, Bloodthinners, Allergies)

**REHABILITATION GUIDELINES
MEDIAL PATELLOFEMORAL LIGAMENT REPAIR**

DOS:

	WEIGHT BEARING	BRACE	ROM	EXERCISES
PHASE 1 0-2 weeks	As tolerated in brace	On at all times during the day and while sleeping Off for hygiene	0-90° begin immediately	Heel slides, quad and hamstring sets, gastroc stretch, SLR in brace, modalities
PHASE 2 2-6 weeks	Full	Discontinue at 6 weeks if able to obtain full ext w/o lag	Maintain full extension and progress flexion	Progress weight bearing flexibility; begin toe raises, and closed chain quad work. Begin floor based core and glutes work, balance and exercises, hamstring curls, and stationary bike Scar mobs 4-6 weeks when adequate healing
PHASE 3 6-12 weeks	Full	None	Full	Advance closed chain quads, progress balance, core/pelvic stability work Begin elliptical
PHASE 4 3-5 months	Full	None	Full	Initiate running at 16 weeks Sport specific drills as tolerated at 20 weeks Return to play at 24 weeks p/o when cleared by physician