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ORTHOPAEDIC SURGERY
 FRACTURES
 JOINT REPLACEMENT
 SPORTS MEDICINE

Medial Patellofemoral Ligament Reconstruction/Repair Rehabilitation Program	
Phase 1: 0-4 weeks	<p>ROM: 0° to 90°</p> <p>Weight-bearing: Brace locked at 0° for ambulation x4 weeks. TTWB weeks 0-2, PWB weeks 2-4.</p> <p>Modalities: Cryotherapy at least 4x/day, IFC for pain/effusion, and NMES for Quadriceps activation.</p> <p>TherEx: Hamstring stretches, gastrocsoleus stretches, and ITB/HIP stretches. Knee extension stretches, 4 way hip SLR, hamstring isometrics/isotonic per ROM, QS (with NMES) avoiding PF pain, calf strengthening, and core stability routine as indicated.</p>
Phase 2: 4-6 weeks	<p>ROM: 0° to 120°</p> <p>Weight-bearing: WBAT with appropriate assistive device, Unlock brace for weight bearing depending on Quad control and/or SLR extensor lag.</p> <p>Modalities: Cryotherapy daily, IFC for pain/effusion, and NMES for Quadriceps activation.</p> <p>TherEx: Continue all stretching, Medial Patellar mobs, Scar tissue massage, Cycle per ROM, Hip strengthening machine, CKC-partial squats, step-ups, and calf raises as WB allows; balance/proprioception per WB, Hamstring curls, Cardio, core stability and Upper body exercises as tolerated.</p>
Phase 3: 6-12 weeks	<p>ROM: Full</p> <p>Modalities: Cryotherapy daily for residual swelling, NMES for Quadriceps</p> <p>TherEx: Flexibility routine, Cycle, Elliptical trainer, Stairmaster if no PF pain or chondrosis, Hip machine, OKC Quad strengthening 0° to 45°, Total LE strengthening, CKC-add partial lunges, lateral step-ups, and leg press; balance/proprioception, Cardio conditioning, and core stability routine.</p>
Phase 4: 12-16 weeks	<p>Continue all strengthening/stretching routine. Add sportsmetrics/plyometrics and sport specific activities if strength is appropriate.</p>