

Post-Op Week 0-2:

Exercises:

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1. Stationary bike for ROM without restrictions (not full

4. Continue core and hip strengthening with ROM restrictions

2. Closed chain quadriceps exercises
3. Mini squats 0-45⁰ with ball

Physical Therapy Protocol Following MPFL Reconstruction

Weight Bearing Status – AS TOLERATED in brace locked in extension with crutches x 6 weeks

Goals:	 Minimize swelling and pain Establish quadriceps control (No NMES over VMO) Restore FULL knee extension ROM: 0-90⁰ PROM/AAROM
Exercises:	 Quad sets, SLR - flexion, abduction, adduction Hamstring and IT band stretching, calf towel stretch, ankle pumps Modalities for pain and swelling (No NMES over VMO)
Criteria before Phase 2: Quad control, full passive extension, minimal joint effusion	
Post-Op Weeks 2-4:	
Goals:	 Establish quadriceps control Core and hip strengthening with ROM restrictions ROM: 0-90⁰ PROM/AAROM
Exercises:	 Prone quad sets, TKE Four- way theraband Modalities PRN
Criteria before Phase 3: ROM 90°, Quad strength = 60% of normal, minimal to no joint effusion	
Post-Op Weeks 4-6:	
Goals:	 ROM: Maintain FULL extension, 90⁰ flexion PROM/AAROM Restore quadriceps strength Begin restoring proprioception

revolutions)

Post-Op Weeks 6-8:	
Goals:	 Discontinue brace and crutches at week 6 (normal gait and good quad control) Restore proper gait training Regain FULL ROM
Exercises:	 SLRs without brace Continue with stationary bike (high seat, low resistance) Continue with closed chain exercises Proprioception (mini trampoline standing, stable and unstable BAPS exercises)
Post-Op Weeks 8-12:	
Goals:	 Normalize lower extremity strength Improve endurance and introduce functional exercises Protect paellofemoral joint Progress with strength, power and proprioception
Exercises:	 Mini squats and leg press to 60° Increase stationary bike resistance Step-ups (begin with 2" and gradually increase to 8") Proprioception and balance (lateral slide board, ball throwing and catching on BAPS) Treadmill walking
Post-Op Weeks 12+:	
Goals:	 Return to running progression Functional agilities Return to unrestricted activities by 4-5 months, as per physicians' orders
Exercises:	 Advance with closed chain exercises Begin to incorporate cutting drills into agility training Advance heights with plyometric conditioning Sport specific drills (start at 25% on speed and advance as tolerated
Criteria for release to sport(s):	 Full ROM Quad and hamstring strength 90% of contralateral side No reactive effusion or instability with sport-specific drills No patellofemoral symptoms