

Rehabilitation Protocol: MPFL RECONSTRUCTION

Name: _____

Date: _____

Diagnosis: _____

Date of Surgery: _____

Procedure(s): _____

PHASE I (Weeks 0-2)

- **BRACE:** Locked in extension for ambulation (WBAT in extension), open 0-90 degrees for Motion
- **MOTION:** At least 3x/day max motion to 0-90 degrees, goal at first visit 0-90 AAROM, AROM, very gentle PROM
- **STRENGTHENING:** Quad sets, SLR with brace locked in extension, Heel slides
- **OTHER:** Modalities PRN (E-STIM, ICE, Patellar Glides), crutches for ambulation

PHASE II (WEEKS 2-6)

- **BRACE:** Locked in extension for ambulation, open 0-120 degrees for Motion, wean from brace beginning at 6 weeks
- **MOTION:** increase AAROM, AROM, PROM: **GOAL of 90 degrees by 6 weeks or consider MUA**
- **STRENGTHENING:** **Core**, Gait training, closed chain extension exercises, toe raises, Balance exercises, Exercise bike as tolerated
- **OTHER:** Modalities PRN (E-STIM, ICE, Patellar Glides), wean from crutches as tolerated

PHASE III (WEEKS 6-12)

- **BRACE:** None
- **MOTION:** AAROM, AROM, PROM to obtain full ROM (prone hangs, etc)
- **STRENGTHENING:** as in phase 3, advance closed chain exercises, begin proprioception exercises, add stairmaster/elliptical
- **OTHER:** Modalities PRN (E-STIM, ICE, Patellar Glides)

PHASE IV: (WEEKS 12+)

- **BRACE:** None
- **MOTION:** Full
- **STRENGTHENING:** **Core**, closed chain quads, HS strengthening, sports specific training may begin
- **OTHER:** Modalities PRN (E-STIM, ICE, Patellar Glides, HS stretching)
- **RETURN TO SPORT:** 4.5-6 months from surgery, Cybex testing prior to return

Comments:

Frequency:_____ **Duration:**_____

Signature:_____ **Date:**_____