



MPFL Repair/Reconstruction Rehab Protocol

This protocol provides you with general guidelines for initial stage and progression of rehabilitation according to specified time frames. Specific changes in the program will be made by the physician as appropriate for the individual patient.

******Please fax initial assessment and subsequent progress notes directly to MOSMI at 952-944-0460******

Frequency 2 times per week.

- No open chain or isokinetic exercises
- Provide patient with home exercise program (HEP) per protocol

Period of protection (Weeks 0-6)

- Weight bear as tolerated in Hinged Knee Brace. Wean crutches as tolerated.
- Follow Brace Wear and ROM limits per chart below:

Week	ROM for exercises	ROM for ambulation
0-1	0-45	Locked in Extension
1-2	0-90	Locked in Extension
2-4	0-Advance ROM as tolerated	Locked in Extension
4-6	Full ROM as tolerated	Unlocked to 30 degrees
After 6 weeks		Transition to Patellar Stabilization Brace

Weeks 2 - 4

Goals

- Modalities prn (ie electrical stimulation, ultrasound, etc) per discretion of therapist.
- Heat before therapy sessions.
- Ice after therapy sessions.

Guidelines/Exercises

- ROM exercises – progress through passive, active and active assisted ROM within ROM limits detailed above.
- Extension board and prone hang with ankle weights (up to 10 lbs) if necessary to regain full extension.
- Strengthening – quad sets, SLRs with knee locked in extension in brace.
- Bilateral ¼ knee bends (Mini- Wall slide or Mini-Squat)
- Terminal Knee Extensions (TKE)
- No restrictions to ankle/hip strengthening. Begin core program for abdomen/lumbar.

Weeks 4 - 6

Goals

- Modalities prn (ie electrical stimulation, ultrasound, etc) per discretion of therapist.

Weeks 4 – 6 (cont.)

Goals

- Ice after therapy sessions.

Guidelines/Exercises

- ROM exercises– progress through passive, active and active-assisted ROM as detailed above.
- Strengthening – quad sets, SLRs out of brace
- Bilateral ½ knee bends (Wall slide or Squat)
- Terminal Knee Extensions (TKE) to ROM limit.
- Initiate Leg Press, Step Ups
- Stairmaster and/or Stationary Bicycle
- Proprioception Exercises in Brace (BAPS, bodyblade, ball toss)
- No restrictions to ankle/hip strengthening. Continue core program for abdomen/lumbar.

Weeks 6-12

Goals

- Modalities prn (ie electrical stimulation, ultrasound, etc) per discretion of therapist.
- Heat before therapy sessions.
- Ice after therapy sessions.

Guidelines/Exercises

- ROM exercises– progress through passive, active and active-assisted to full ROM
- Continue squats, leg press
- Advance to Step Downs, Lunges, Side lunges (In brace) and Slide Board (In brace)
- Stairmaster and/or Stationary Bicycle
- Begin forward treadmill running program in brace when 8” step down is satisfactory (No sooner than 8 weeks)
- Proprioception Exercises in Patellar Stabilization Brace (BAPS, bodyblade, ball toss)
- Advanced ankle/hip strengthening. Core maintenance program for abdomen/lumbar.

Months 3 - 6

Goals

- Continue modalities prn as indicated above.
- Heat before therapy sessions.
- Ice after therapy sessions.
- Return to sports after 18+ weeks (MD clearance required)

Guidelines/Exercises

- Advance strengthening as tolerated, continue closed chain exercises. Increase resistance on equipment.
- Begin plyometrics and increase as tolerated.
- Initiate sport-specific agility training in brace (figure 8s, cutting drills, quick start/stop, etc.)
- Advanced core strengthening and maintenance program
- Begin to wean patient from formal supervised therapy encouraging independence with (HEP).