



ACL Reconstruction Physical Therapy Protocol

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- **Weight-bearing:** Weight bearing at tolerated with brace locked in extension
 - **Use crutches for balance and to prevent falling- progress as follows:**
 - Full weight-bearing in immobilizer using crutches
 - Full weight-bearing in immobilizer without crutches
 - Full weight bearing without immobilizer or crutches

PHASE I (WEEKS 0-3):

- **Range of Motion**
 - **Start POD # 2**
 - Full extension to flexion as tolerated
 - Patellar mobilizations
 - Use ice to reduce swelling and effusion after exercises
- **Therapeutic Exercises**
 - Weeks 0-2: Straight leg raise/Quad sets, Hamstring isometrics
Perform exercises in the brace if quad control is inadequate
 - Establish normal gait pattern early
 - Weeks 2-8: Begin progressive isometric closed chain exercises, stationary bike for ROM

PHASE II (WEEKS 3-6):

- **Weight-bearing:** Full weight-bearing with a normal gait pattern, no limping
- **Range of Motion** – Advance to full/painless ROM
- **Therapeutic Exercises**
 - Advance bilateral and unilateral closed chain exercises
 - Emphasis on concentric/eccentric control
 - Stationary bike/Treadmill/Stairmaster/Elliptical
 - Start sport cord lateral drills
 - Ice after exercises

PHASE III (WEEKS 6-10):

- **Weight-bearing:** Full weight-bearing with a normal gait pattern- no crutches
- **Range of Motion** – Full/painless ROM
- **Therapeutic Exercises**
 - Advance strength training
 - Progress to balance/proprioception exercises
 - Start light plyometric exercises
 - Start jogging and basic running program at 8 weeks

PHASE IV (WEEKS 10+):

- **Weight-bearing:** Full weight-bearing with a normal gait pattern
- **Range of Motion** – Full/Painless ROM
- **Therapeutic Exercises**
 - Continue closed chain strengthening exercises and proprioception activities
 - Emphasize single leg loading
 - Sport-specific rehabilitation – running/agility training at 9 months
 - Return to impact athletics – 16 months (if pain free)
 - Maintenance program for strength and endurance