

MCL Repair/Reconstruction

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• Phase I – Immediate Post Surgical Phase (Week 0-2)

- Goals
 - Maintain integrity of reconstructed tissue
 - Gradually increase PROM
 - Decrease pain and inflammation
 - Prevent muscular inhibition
- Cryotherapy for pain/inflammation
 - Ice 15-20 minutes every hour
- Sleeping
 - Sleep in brace/knee immobilizer
- Weight Bearing
 - Touch down weight-bearing in hinged brace
 - Crutches as needed
- Brace
 - Hinged brace locked in extension for ambulation and sleeping
- o ROM
 - 0-40 degrees
- Muscle Retraining
 - Quadriceps isometrics, SLR
 - Heel slides
- Avoid excessive hamstrings stretches, active hamstrings exercises if hamstrings autograft used for 6 weeks
- Exercises
 - Quad sets, patellar mobs, gastroc/soleus stretches
 - Side-lying hip/core

Phase II – Protection Phase (Week 2-6)

- Goals
 - Allow healing of soft tissue
 - Do not overstress healing tissue
 - Gradually increase ROM
 - Progression based on swelling/inflammation

Decrease pain and inflammation

o Week 2-4

- Continue use of ice as needed
- ROM
 - 0-60 degrees
- Weight bearing
 - Continue touch-down weight-bearing
- Muscle retraining
- Core strengthening

Week 4-6

- May use heat prior to exercises
- ROM
 - 0-90 degrees
- Weight bearing
 - Continue touch-down weight-bearing
- Muscle retraining
- Core strengthening

• Phase III – Intermediate Phase (Week 6-12)

- Goals
 - Full ROM (Week 6-8)
 - Focus on maintaining full extension
 - Eliminate swelling
 - Functional exercise movements
 - May discontinue brace (Dr. Hess discretion)
- Criteria to progress to Phase III
 - Minimal inflammation/pain
 - Near full ROM
 - Strong quadriceps contraction
- Weight bearing
 - Advance 25-50% weekly until full by 8 weeks
- Continue quadriceps strengthening
- Continue above exercises
- May begin stationary bike
- May begin wall squats
- May begin pool program
- Closed-chain quad exercises
- o Balance, proprioception
- Core/hip/glute program

• Phase IV –Strengthening Phase (Week 12-18)

- Goals
 - Maintain full ROM
 - Improve limb strength and endurance
 - Gradual return to functional activities
- Criteria to progress to Phase IV
 - Full, non-painful ROM
 - Absence of swelling/inflammation
- Continue above exercises
- o Advance closed-chain strengthening
- May begin straight-ahead running at 12 weeks
- May begin jumping at 16 weeks

Phase V –Return to Activity Phase (Week 18-24+)

- Goals
 - Gradual return to strenuous work activities
 - Gradual return to recreational sports activities
- Criteria to progress to Phase V
 - Appropriate strength level/Clinical exam
- May begin sprinting, cutting, pivoting at 20-22 weeks
- o Initiate plyometric program, sport specific drills at 20-22 weeks
- o May complete functional sports assessment (FSA) at 24 weeks
- Clearance to return to sport dependent upon progress with PT, discussion with Dr. Hess