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PCL + Posterolateral Corner (PLC) Reconstruction Rehabilitation Protocol

The goals of this protocol are to protect the reconstructions while preventing knee stiffness, so early Passive ROM exercises are very important. In addition, preventing excessive anterior and/or posterior tibia translation is also very important.

Phase / Goals	Immobilization	ROM	Therapeutic Exercises
 Phase 1 (0-2 weeks) Goals: SLR x 20 without lag Normal gait mechanics PROM: 0 → 90° Hold wall slides x 2 weeks No varus stress, hyperextension or tibial rotation 	 Toe touch weight bearing x 6 weeks Brace locked in full extension during ambulation and sleep PCL brace at all times including sleep 	Begin PROM 0 – 90 deg Avoid hyperextension and tibial rotation Patellar mobilization all directions Modalities: NMES if unable to perform SLR without lag Hi-volt estim for edema control/ IFC/ice estim for pain control Cryocuff/Game Ready Compression/ Ice	 Bike for ROM (rocking) Flexion: heel slides, seated knee flex Extension: heel prop, prone hang Long sitting HS stretch Quad sets, glut sets SLR x4 with assist until no lag Standing TKEs Ankle pumps Calf raises on leg press Limit knee varus (i.e. no side lying hip abd or side stepping) No hamstring isometrics for 6 weeks
Phase 2 (3-6 weeks) Goals: Minimal joint effusion Avoid isolated active hamstring exercises No varus stress, hyperextension, posterior tibial sag or tibial rotation	Toe touch weight bearing Brace unlocked, 0-90 PCL brace at all times including sleep	 Begin full A/PROM as tolerated Modalities: Cont. above Scar STM when incision healed Patellar mobs all directions Gentle prone quad stretch/knee flex Manual assist extension/passive stretch HS STM for extension assist 	 Continue above Heel slides/wall slides/seated assist flexion Quad sets/SLR in Brace at 0° (assist patient with this exercise until solid quad contraction developed, prevent posterior sag) BFR – initiate post op day 15 Glut sets, clams/mini-hydrants/glut pushes No hamstring isometrics for 6 weeks ***No open chain HS x 4 months

Phase 3 (7-12 weeks) Goals: Maintain full AROM No open chain HS x 4 months Limit knee varus No tibial external rotation	 Progress to FWB PCL Brace full time 	 Full A/PROM Manual: Joint mobs PRN for full flex and ext ROM Patellar mobs/ Scar STM with extractor Modalities: Ice/stim PRN 	 Stationary bike with no resistance LE stretches Wall sits/squats <60° flex, progress to ball toss with wall sit and SL squat Total gym SL leg press, calf raise Step ups/lateral step over's- progress to faster pace No open chain HS x 4 months
Phase 4 (13-16 weeks) Goals: Jogging without pain/swelling SL jump w/o difficulty Functional Knee Test results >75% (taken at week 16)	PCL Brace full time	 Full A/PROM Avoid tibial external rotation 	 Continue everything in phase 3 Begin elliptical and stair master May begin swimming SL dead lift and RDLs
Phase 5 (17-20 weeks) Goals: Sport-specific training without pain or swelling Functional Knee Test results >85% (taken at week 20)	PCL Brace full time	Continue Full A/PROMModalities PRN	 Increase walk-jog progression Figure 8 running patterns Gym-program activities Sport-related strengthening Can begin isolated resisted hamstring exercises Otherwise progress per standard PCL protocol
Phase 6 (20-28 weeks) Goals: • Functional Knee Test Results >90% (taken at week 24)	PCL Brace full time	Continue Full A/PROM	 Begin walk-jog progression week 20 if full ROM/no edema/full strength and can perform SL hops x10 pain-free (SUPERVISED) No contact No cleats No competition Gym-program activities
Phase 7 (>29 weeks)	FWB DC full-time brace PCL brace for sports activities until 12 months post op	• Full A/PROM	 Start plyometric/jump training Isokinetic test for Quad strength difference ≤ 10% and unilateral Hamstring/Quad strength ratio of 65% or better Continue strength testing monthly until patient passes then perform functional testing No cutting/pivoting x 9 months Dr. Ridley to discuss prior to return to sport

RETURN-TO-SPORT CRITERIA:

Full return to all sports and games

- o Atleast 10 months from surgery
- o No functional complaints, full range of motion & no effusion

- Confidence when running, cutting, jumping at full speed
 >90% isometric quadriceps strength
 >90% contralateral values on hop tests

- >90% Quad Index LSI with Biodex or HHD
- >90% Quad peak torque/body weight on Biodex (if applicable)
- Excellent ACL-RSI
- Wear PCL brace for sports/recreational activities for first year after surgery