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PCL Injury Non-Surgical Rehabilitation Protocol

Phase / Goals	Immobilization	ROM	Therapeutic Exercises
Phase 1 (0-2 weeks) Goals: <ul style="list-style-type: none"> • ROM 0-90° • Protect posterior tib sag • No quad lag 	<ul style="list-style-type: none"> • PCL brace at all times including sleep • 20lb flat foot weight bearing in brace x 2 weeks 	<ul style="list-style-type: none"> • PROM 0-90° – all ROM exercises performed prone or side lying x 2 weeks • Modalities PRN 	<ul style="list-style-type: none"> • Home stretching 2-3x daily • Flexion/extension seated/calf assisted • Quad sets, SLR • Ankle pumps • No hamstring isometrics x6 weeks
Phase 2 (3-4 weeks) Goals: <ul style="list-style-type: none"> • Control effusion • Full PROM • Full weight bearing 	<ul style="list-style-type: none"> • PCL brace at all times including sleep • Advance to full weight bearing 	<ul style="list-style-type: none"> • Full PROM, begin AAROM <ul style="list-style-type: none"> ◦ Avoid hyperextension x 12 weeks • Modalities PRN <ul style="list-style-type: none"> ◦ Begin BFR 	<ul style="list-style-type: none"> • Closed chain strengthening 0-45° • Quad sets/SLR in Brace at 0° (assist patient with this exercise until solid quad contraction developed, prevent posterior sag) 3x10 3x's/daily, may use ankle weights as they will increase anterior translation • Begin stationary bike w/ no resistance once ROM 0-120° • Can begin pool therapy, but NO kicking
Phase 3 (5-6 weeks) Goals: <ul style="list-style-type: none"> • FWB • Full ROM • 4+/5 quad strength 	<ul style="list-style-type: none"> • FWB • PCL brace at all times including sleep 	<ul style="list-style-type: none"> • Progress to full A/PROM <ul style="list-style-type: none"> ◦ Avoid hyperextension x 12 weeks • Patellar mobilization • Modalities PRN 	<ul style="list-style-type: none"> • ¼ squats, leg press 0-60° light weight • Gentle sit and reach for hamstrings (no hypertext) • Start proprioception training in brace • Stationary bike with minimal resistance • Single leg stance

Phase 4 (7-8 weeks) Goals: <ul style="list-style-type: none"> • FWB 	<ul style="list-style-type: none"> • FWB • PCL Brace full time 	<ul style="list-style-type: none"> • Full A/PROM <ul style="list-style-type: none"> ○ Avoid hyperextension x 12 weeks • Patellar mobilization 	<ul style="list-style-type: none"> • Light RDL/sliders • Leg press 0-90° light weight • Squat progression • Stationary bike advance resistance • Progress from bilat leg press to unilateral w/ light weight
Phase 5 (9-12 weeks) Goals: <ul style="list-style-type: none"> • 5/5 strength • Normal gait • Good single leg stance 	<ul style="list-style-type: none"> • FWB • PCL Brace full-time 	<ul style="list-style-type: none"> • Full A/PROM <ul style="list-style-type: none"> ○ Avoid hyperextension x 12 weeks 	<ul style="list-style-type: none"> • Start plyometric/jump training • Start long lever hamstring exercises and strengthening • Isokinetic test for Quad strength difference \leq 10% and unilateral Hamstring/Quad strength ratio of 65% or better • Initiate early return to play exercises • Return to running when sufficient strength and stability (>90% quad strength and girth)
Phase 6 (13-16 weeks) Goals: <ul style="list-style-type: none"> • Return to sport 	<ul style="list-style-type: none"> • FWB • PCL brace during training or sport 	<ul style="list-style-type: none"> • Full A/PROM 	<ul style="list-style-type: none"> • Start resisted dominant hamstring • Advance return to play exercises and drills • Avoid deep loaded CKC flexion until 16 weeks • Continue strength testing monthly until patient passes then perform functional testing • Dr. Ridley to discuss prior to return to sport
Phase 7 (17-28 weeks) Goals: <ul style="list-style-type: none"> • Full game play without instability or swelling 	<ul style="list-style-type: none"> • FWB • PCL brace optional 	<ul style="list-style-type: none"> • Full A/PROM 	<ul style="list-style-type: none"> • Continue strength and plyometric training • Advance game time and endurance

RETURN-TO-SPORT CRITERIA:

Full return to all sports and games

- Atleast 3 months from injury
- 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