

Patellar / Quadriceps Tendon Repair

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Surgeon must specify on the referral any specific requests or deviations that fall outside the scope of this

protocol.		
Phase I	Phase II	Phase III
(Weeks 0 - 6)	(Weeks 6 – 12)	(Weeks 12 – 16+)
PRECAUTIONS No flexion for 2 weeks PWB with immobilizer/brace locked at 0° and ambulatory aid CLINIC CARE Patellar mobilization PROM Week 2 Knee flexion up to 45° (or as directed by surgeon) Week 4-6 Knee flexion 0-90° (or as	PRECAUTIONS Use crutches until quad control and full extension are achieved Progress to WBAT and full WB based on joint response D/C brace for gait as strength and motion allow; Unlock brace 60-90° for ambulation CLINIC CARE Patellar mobilization PROM Week 7-8 Knee flexion 0-115° (or as	PRECAUTIONS • Full WB EXERCISE • Progress cardio • Initiate single-leg CKC strength (squats, lunges) • Advance proprioception GOALS or Criteria to Advance • Full AROM • Community ambulation without brace • Symmetric single-leg squat ≤
 Knee flexion 0-90° (or as directed by surgeon) EXERCISE Quad sets SLRs in knee immobilizer Ankle pumps Active heel slides Passive extension Hip strength with brace on Calf raises GOALS or Criteria to Advance ROM 0-90° 	 Knee flexion 0-115" (or as directed by surgeon) Week 9-10 Knee flexion 0-130° (or as directed by surgeon) EXERCISE Bike for ROM Initiate CKC knee strength (Don't load knee flexion past 70°) Progress hip, core, and ankle strength Proprioception OKC extension GOALS or Criteria to Advance AROM 0-120° SLR without lag 	Progress to Sports Phase after 16 weeks if the following are met: Equal A/PROM Jogging pain-free with symmetrical gait Strength portion of LE functional test within 80% of uninvolved leg
		Revised 11/2019

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Questions and updates regarding the progress of any specific patient are encouraged and should be directed to Dr. Cooper at 952-456-7617.