

## ACL RECONSTRUCTION REHAB PROTOCOL

	WEIGHT BEARING	BRACE	ROM	EXERCISES	Goal Progression Check List (if participating)
<b>PHASE I</b> 0-4 weeks	<p>WBAT with brace locked and crutches*</p> <p>Unlock brace when adequate quad control</p> <p>Wean off crutches as gait normalizes</p>	<p>0-2 weeks: Locked in full extension for ambulation and sleeping</p> <p>2-4 weeks: Unlocked with adequate quad control; may remove for sleep</p> <p>If meniscus repair, refer to patients PT script*</p>	<p>Advance as tolerated</p> <p><b>STRESS EARLY EXTENSION</b> (avoid hyperextension &gt; 10°)</p> <p>If meniscus repair, refer to patients PT script*</p>	<p>Extension exercises: Gastroc and hamstring** stretches, prone hangs, manual overpressure</p> <p>Flexion exercises: heel slides, wall slides</p> <p>4 way patellar mobs</p> <p>E stim and biofeedback</p> <p>Early strengthening: quad sets, SLR x 4, TKE (CKC), mini squats, wall sits</p> <p>Progress strength: leg press, step ups/downs, bridges, hamstring curls**</p> <p>Balance and proprioception exercises</p> <p>Gait training</p>	<p><b>Full ambulation without assistance:</b></p> <ul style="list-style-type: none"> <li>• VAS ≤ 5 (worst) &amp; IKDC ≥ 30</li> <li>• Knee extension PROM ≥ 0°</li> <li>• Knee Flexion PROM ≥ 110°</li> <li>• ≥ 30 SLR without quad lag</li> <li>• BESS (SL-FIRM) ≤ 5</li> <li>• MD APPROVAL</li> </ul>
<b>PHASE II</b> 4-12 weeks	As tolerated*	Discontinue at 4 weeks if no extension lag*	Full*	<p>Continue with phase I</p> <p>Aggressive ROM exercises if lacking (weighted prone hangs)</p> <p>Progressive strengthening: add single leg squats and leg press, lunges, mini band walking, step ups</p> <p>Advance hip and core; perturbation exercises</p> <p>Cardio: Bike, elliptical, fast treadmill walking (limit under 20 min until week 8, then as tolerated)</p> <p>Aquatic: SLR x 4, squat, bicycle kick, fast walk to jog</p>	

## ACL RECONSTRUCTION REHAB PROTOCOL, pg 2

<p><b>PHASE III</b> 12-18 weeks</p>	<p>Full</p>	<p>Functional bracing dependent on patient activity and doctor recommendation</p>	<p>Full</p>	<p>Advance closed chain strengthening</p> <p>Knee extensions 90°-30°, progress to eccentrics</p> <p>Progress proprioception activities</p> <p>Continue non-impact cardio as tolerated</p> <p>Begin swimming</p> <p>If meet “goal progression” criteria, begin straight line jog to run progression</p> <ul style="list-style-type: none"> <li>• <b>Allografts delay to 16 wk</b></li> </ul>	<p><b>Initiate Jogging Program:</b></p> <ul style="list-style-type: none"> <li>• VAS ≤ 3 (Worst) &amp; IKDC ≥ 60</li> <li>• Knee extension PROM ≥ 0° or symmetry</li> <li>• Heel Height Difference ≤ 1 cm</li> <li>• Knee Flexion PROM ≥ 120°</li> <li>• Overhead squat (FMS) ≥ 2</li> <li>• Single leg squats—Vail Test ≥ 1 minute</li> <li>• MD APPROVAL</li> </ul>
<p><b>PHASE IV</b> 18-24 weeks</p>	<p>Full</p>	<p>Functional bracing dependent on patient activity and doctor recommendation</p>	<p>Full</p>	<p>Continue and progress strengthening program based on goals and deficits</p> <p>Agility progression when criteria met: side steps, crossovers, figure 8 running, shuttle run, one/two leg jumping, cutting, acceleration decel sprints, agility ladders</p> <p>20 weeks: Initiate plyometric program as appropriate for patient goals</p> <ul style="list-style-type: none"> <li>• <b>Allografts delay to 24 weeks</b></li> </ul> <p>Initiate sport specific drills as appropriate</p>	<p><b>Initiate Agility Training:</b></p> <ul style="list-style-type: none"> <li>• VAS ≤ 2 ( Worst) &amp; IKDC ≥ 70</li> <li>• Tampa Kinesiophobia Scale &lt; 20</li> <li>• Heel Height Difference ≤ 1 cm</li> <li>• Quad &amp; HS symmetry ≥ 80%</li> <li>• Y Balance deficits &lt; 4 cm (each direction)</li> <li>• Landing error scoring system ≤ 5</li> <li>• MD APPROVAL</li> </ul>
<p><b>PHASE V</b> &gt; 6 months</p>	<p>Full</p>	<p>Functional bracing dependent on patient activity and doctor recommendation</p>	<p>Full and pain- free</p>	<p>Gradual return to sports participation</p> <p>Maintenance program</p>	<p><b>FULL RETURN TO SPORT:</b></p> <ul style="list-style-type: none"> <li>• VAS ≤ 2 ( Worst) &amp; IKDC ≥ 80</li> <li>• Tampa Kinesiophobia Scale &lt; 20</li> <li>• Heel Height Difference ≤ 1 cm</li> <li>• Quad &amp; HS symmetry ≥ 90%</li> <li>• HS/Quad strength ration ≥ 55%</li> <li>• Symmetry for Hop testing ≥ 90%</li> <li>• Agility Tests: agility T-test, Figure of 8 Test</li> <li>• Complete sports metrics</li> <li>• MD APPROVAL</li> </ul>