

Dr. Pathik Shah
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Diploma in Football medicine (FIFA)

POSTEROLATERAL CORNER KNEE REPAIR / RECONSTRUCTION
PHYSICAL THERAPY PRESCRIPTION

Diagnosis: s/p PLC Repair / Reconstruction

WEEKS 1-2:

GOALS – Pain/effusion control, restore quadriceps function

- ___ Ambulate NWB with Brace locked @ 0° extension
- ___ Avoid Varus Loads to Knee for first 6 weeks
- ___ AAROM/AROM 0 – 30 degrees
- ___ Patellar mobilization (please educate patient)
- ___ Calf pumps
- ___ Quadriceps Re-education (E-stim, Biofeedback)
- ___ Quadriceps sets, co-contractions quads
- ___ Straight leg raise (SLR) sets with foot straight up, **in brace** (NO ABDUCTION)
- ___ Cryotherapy
- ___ No active knee flexion, no hamstring workouts

WEEKS 3-5:

- ___ Ambulate TTWB with Brace locked @ 0° extension, may unlock for sitting with limit 0-90 deg
- ___ Continue SLR's in brace with foot straight up and quadriceps re-education
- ___ Scar massage when incision is healed
- ___ AAROM/AROM 0 – 90 degrees (ROM limited 0 – 90 degrees for first 6 weeks)
- ___ Patellar mobilization (please educate patient)
- ___ Calf pumps, heel slides
- ___ Cryotherapy
- ___ Continue w/ Home Exercise Program

WEEKS 6-8:

- ___ Continue with above exercises and cryotherapy
- ___ Progress to PWB w/ Brace unlocked 0- 90
- ___ Advance ROM as tolerated with no limits with brace on
- ___ Stationary bike for range of motion (short crank or high seat, no resistance) without brace
- ___ Progress to full ROM
- ___ Progressive SLR program with brace on – start with 1 lb, progress 1-2 lbs per week
- ___ Hamstring active knee flexion ok
- ___ Seated leg extension (90 to 40 degrees) against gravity with no weight
- ___ Calf raises
- ___ Hip adductor and flexor strengthening

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WEEKS 8-10:

- ___ Discontinue crutches when gait is not antalgic (progressive weaning to one crutch then d/c)
- ___ Restore normal gait, can unlock brace for ambulation when quadriceps control restored
- ___ Flexion exercises seated AAROM
- ___ Proximal musculature PRE's
- ___ Continue ROM stretching and overpressure into extension
- ___ SLR's with brace on – progressive weight
- ___ Leg press 0-70 degree arc of motion

WEEKS 11-12:

- ___ Restore full ROM, aggressive if not restored at this point (Goal 0 to 120 degs)
- ___ Continue Proximal musculature PRE's
- ___ Mini-squats (0-60 degs) and quad strengthening, progress to ball squats
- ___ 4 inch step ups
- ___ Isotonic leg press (0-90 degrees)
- ___ Bike with light resistance
- ___ Initiate retro treadmill with 3% incline (for quad control)
- ___ Sport cord (bungee) walking and lateral step out with therabands
- ___ Maintain / Improve flexibility in lower extremities
- ___ Advance hip/sore strengthening and proprioception training
- ___ D/C brace if quad control adequate

WEEKS 13-14:

- ___ Begin resistance for open chain knee extension
- ___ Swimming allowed, flutter kick only
- ___ Progress balance and board throws
- ___ Plyometric leg press
- ___ 8 inch step ups/4 inch step downs, progress to 8 inch step downs
- ___ Start slide board
- ___ Progress to light running and sport specific drills if:
 - Quad strength > 75% contralateral side
 - Active ROM 0-125 degrees
 - Functional hop test >70% contralateral side
 - No swelling or minimal pain
 - Demonstrates good control on step down

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WEEKS 15-23:

- ___ Stairmaster machine
- ___ If full ROM and quad strength >80% contralateral side, function hop test >85% contralateral side, can progress to home program for running and jumping

MONTHS 6-12:

- ___ Criteria to return to sports and unrestricted activities
 - Full active ROM
 - Quadriceps >90% contralateral side
 - Satisfactory clinical exam
 - Functional hop test >90% contralateral side