

ACL + PCL Reconstruction Rehabilitation Protocol

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PT Frequency: 2-4 times per week

ROM Restrictions: 0-90° beginning POD1 in **prone position**

Brace: Knee immobilizer for 3-7 days until good quad control, then dynamic PCL brace x 6 months **Weightbearing**: Toe touch WB x 6 weeks, then advance 25% weekly until full WB by 8 weeks

Weeks 0-6 (Phase I)

- Weight Bearing: TTWB with crutches x 6 weeks
- Brace:
 - Use immobilizer for 3-7 days until good quadriceps control. Then, transition to Dynamic PCL Brace (to be used for 6 months post-operatively). Off **only** for hygiene.

• Range of Motion: <u>PRONE ONLY</u>

- Passive flexion 0-90° x 6 weeks
- Active assisted extension 70 to 0 degrees x 2 weeks, then 90-0 degrees until 6 weeks
- Emphasize maintenance of full extension
- **NO** active knee flexion or open chain hamstring isometrics x 8 weeks
- Exercises:
 - o 0-2 weeks
 - Patella mobilization
 - Towel extensions
 - Prone hangs
 - SLR supine with brace locked at 0 degrees
 - Quadriceps isometrics at 60 degrees
 - \circ 2-6 weeks
 - Short crank (90mm) ergometry
 - SLR (all planes): progressive resistance
 - Multiple-angle quadriceps isometrics: 60 to 20 degrees

• Hamstring avoidance until 6 weeks post-op

Weeks 6-12 (Phase II):

- Weight Bearing: Advance to 25% WB, then 50% WB, then 75% WB to full WB by 8 weeks
- Brace: Dynamic PCL Brace. Discontinue crutches once gait is non-antalgic
- **ROM**: Progress to full ROM
- Exercises:
 - Initiate forward step-up program (6-8 weeks)
 - Stationary bike with low resistance settings and leg presses to a maximum of 70° of knee flexion
 - Leg press, mini-squats (60-0° arc)
 - Standard ergometry (if knee ROM > 115°)



- AAROM exercises
- Stairmaster (6-8 weeks)
- Proprioception training (prop board, BAPS)
- Aquacisor (gait training)
- Retrograde treadmill ambulation
- Initial step-down program (8-10 weeks)

Weeks 12-20 (Phase III):

- Weight Bearing: Full
- Brace: Dynamic PCL Brace
- ROM: Full
- Exercises:
 - Leg press: squats (80 to 0° arc)
 - AAROM exercises
 - Proprioception training (prop board, BAPS)
 - o Lunges
 - Advanced proprioception training (pertubations)
 - Agility exercises (sport cord)
 - o Versaclimber
 - Retrograde treadmill running
 - Quadriceps stretching

Weeks 20-26 (Phase IV):

- Weight Bearing: Full
- Brace: Dynamic PCL Brace
- ROM: Full
- Exercises:
 - Start forward running (if descend 8" step satisfactorily)
 - o Continue lower extremity strengthening, flexibility, proprioceptive & agility programs
 - Initiate plyometric program (if sufficient strength base)
 - Functional hop test (>85% contraleral)

> 6 months (Phase V): Dynamic brace can be discontinued if kneeling stress x-rays demonstrate less than 2mm of difference. Continue lower extremity strengthening, flexibility, proprioceptive & agility programs. Advance plyometric program. Advance agility and sport-specific program. Gradual return to sport-specific activities, return to sports after completion of functional sports assessment and clearance by MD



Exercise	Week 1 2 3 4 5 6 7 8 9 10 12 16 20 24							
Initial Exercises:			ů					
ROM Goals	0-90 °	0-12	25°		Pro	ogress	to full	
Flexion/extension- prone with brace				1		Ŭ		
Flexion/extension- seated/ calf-assisted or prone								
Patella/Tendon mobilization								
Quad Series	0° ISOs	, SLR	60	° ISOs		70-30°	Full arc resi	sted
Hamstring Sets					arc	-resisted		
Sit and Reach for Hamstrings (no hyperextension)								
Ankle Pumps								
Crutch weaning		NWE	2					
SLR (w/ brace until quad control restored)			,					
Toe and heel raises								
Weight-bearing Strength Exercises:	1 2	3 4	5	6 7	8 9	9 10	12 16 20	24
Double Knee Bends			1 -					
Double Leg Bridges								
Step up/Lunge Progression								
Beginning cord exercises		NWB						
Proprioception/Balance Training								
Dead Lift $(2 \rightarrow 1)$								
Squat/Leg Press (ISO →reps, 2→1 leg)				0-4	45°	0-70° (7	0° Max on pr	ess)
Sports Test Exercises								
Cardiovascular Exercises:	1 2	3 4	5	6 7	8 9	9 10	12 16 20	24
Bike with both legs-no resistance								
Bike with both legs- resistance								
Aqua jogging								
Treadmill-walking 7% incline		NWB						
Swimming with fins-light flutter kick								
Elliptical Trainer								
Rowing								
Stair stepper								
*Cardio Exercises							ificant increas	
Agility Exercises:	1 2	3 4	5 5	6 7	8 cardi	o (walk, e 9 10	Iliptical, step 12 16 20	24
Running Progression*		1 I	1		<u> </u>	1 1		
Initial-Single Plane		NWB						
Advance-Multi Directional								
Functional Sports Test								
High Level Activities:	1 2	3 4	5	6 7	8 9	9 10	12 16 20	24
Golf Progression						•		
Outdoor biking, hiking, running		NWB						
Return to Full Sport at 9 months post-op								



Quad Series:

- Quad sets (5 sec hold) and quick contractions (NMES to supplement)
- Prone quad sets
- SLR in 0 degrees extension
- Progression of quad strengthening (WB exercises at 6 weeks)
- LAQ in safe range no added resistance to begin
- Once weight bearing, tandem stance TKE with 5 sec hold
- Isometric wall site
- SLR with resistance
- Step up progression
- Squat progression
- Leg press progression
- Lunge progression

Hamstring Series:

- Hamstring stretching (supine/prone)
- Hamstring set (heel dig) contract hamstring with knee flexed pressing heel into the floor (5 sec hold)
- Hamstring curls
- Progress to resisted hamstring curl

Sport Test Exercises:

- Goals: impact training and introduction of directional drills
- Double leg squat jumps
- Box jumps
- Speed skaters
- Double leg jumps for height and distance. Progress to single leg as tolerated
- Blaze pod change of direction drills

Further Clarifications and Considerations:

- May begin to implement BFR as early as 1-week post-op
- Functional sports test: baseline completed around 7 months post-op with subsequent test at 9 months



Return to Running Criteria

- Trace effusion, flexion within 5 degrees of contralateral side
- LSI on anterior reach Y balance test <u>>90%</u>
- LSI on quadriceps torque output on isometric measurement > 75%
- 12" SL squat tolerance
- Able to walk > 1 mile with no limping or pain
- Able to "hop" with US assist on operative leg 5 times without pain or compensation
- SL balance with eyes closed 30 seconds without loss of balance

Return to Agility / Change of Direction Criteria

- Return to running criteria listed above met
- No effusion
- Full ROM
- Quad LSI on isokinetic <u>>85%</u>
- Hamstring LSI on isokinetic <u>>85%</u>
- LSI on anterior reach Y-balance <u>>95%</u>
- SL hopping pain-free and effusion-free

Return to Sport Criteria

- In order to test must demonstrate full AROM, no pain, no/trace effusion, 5/5 strength, negative Lachman and pivot shift, LSI <u>></u>95% hamstring curl and leg press
- Quadriceps strength <u>>95%</u> of contralateral side (<2cm of atrophy)
- Able to perform single leg squat with correct form
- LSI SL hop >95%
- Y-balance $\geq 95\%$ (mean of 3 trials in anterior, posterolateral, posteromedial / 100)
- Vertical jump test, single leg hop distance, and timed single leg hop over 20-feet <u>>90%</u> of contralateral side

Adapted from post-operative protocol by Dr. Jorge Chahla created by Howard Head Physical Therapy, Jill Monson, PT, OCS and Jon Schoenecker, PT, OCS, CSCS