121 Everett Road Albany, NY 12205 518-453-9088



KYLE R FLIK, MD

kyleflik@yahoo.com

Post-Operative Rehabilitation Guidelines for Anterior Cruciate Ligament Reconstruction

0-2 Weeks: WBAT, Brace locked at 0 degrees for ambulation and sleeping

ROM: 0-90° with emphasis on full extension

Patella mobilization

SLR supine with brace locked at 0 degrees, Quad Sets

Ankle Pumps

Short crank (90mm) ergometry

2-6 Weeks: Brace: unlocked @ 2 weeks (if quad control adequate)

discontinued @ 3 weeks if quad adequate for allograft,

six week for autograft

or six weeks for ACL with meniscus repair

No weight bearing past 90° for ACL with meniscus repair

D/C crutches when gait is non-antalgic (six weeks with meniscus repair)

ROM: 0-125 degrees (Maintain full extension)

Active knee extension to 40 degrees

Standard (170mm) ergometry (if knee ROM > 115 degrees)

Leg Press (80-0 degree arc) Mini Squats / Weight Shifts Proprioception training Initiate Step Up program

6-14 Weeks: Progressive Squat program

Initiate Step Down program

Leg Press, Lunges

Isotonic Knee Extensions (90-40 degrees, closed chain preferred)

Agility exercises (sport cord) Versaclimber/Nordic Track Retrograde treadmill ambulation

14-22 weeks: Begin forward running (treadmill) program when 8" step down

satisfactory

Continue Strengthening & Flexibility program

Advance Sports-Specific Agility Drills

Start Plyometric program

> 22 weeks: Advance Plyometric program, Return to Sport (MD Directed)