



Posterior Cruciate Ligament Reconstruction Protocol Dr. Schaap

Time Frame	Treatment	Goals
Post-Op Day	-Dressing change -Instructions in signs and symptoms of infection -Check for DVT -Issue HEP for quad sets, SLR, hip ab/adduction, patellar mobs, and cryotherapy -Electrical stim for quad reeducation and swelling	-Independent in home exercise program -Fair quad set -Independent with SLR - WBAT locked in extension -home electrical stimulation unit if needed
Phase I (0-4 weeks)	-Frequency=2-3x /week -Progress weight-bearing with brace open to 90 deg -Progress unilateral stance -Progress ambulation to normalize gait -Use gravity assistance to minimize hamstring activity for ROM such as supine wall slide or seated knee flexion -Off-the-shelf brace ordered from SCOA when swelling is decreased unless otherwise stated	-Full Extension -Range of motion to 90 deg -Good quad set -no bike -no isolated hamstring stretches -no open chain or isolated hamstring strength exercises
Phase II (4-11 weeks)	-Frequency= 1-2x /week -Progressed to full range of motion as tolerated -Progress all other strengthening as tolerated Activities: (Begin at 10 weeks)Outside biking program can beginSwimming with a flutter kick only (no diving or flip turns)	-full ROM -functional strength -Brace does not need to be worn for ambulation on level surfaces. Brace should be worn on uneven surfaces.
Phase III (3-9 months)	-Frequency= PRN Activities:Progress functional/sports specific training such as large figure—8 running, side-to side activity and forward/backward activity without any hard planting or cuttingIn line/ice-skating without cutting or turningTwo leg plyometrics and jump rope can be initiated	-Brace on for all more aggressive activities for the first year -Return to full activity/sports per physician's discretion -6-9 month if strength sufficient per Biodex and functional testing completed