

**Posterolateral Corner Reconstruction – Rehab Protocol**

- Brace: TROM brace locked in extension for ambulating until appropriate quadriceps function has returned. (Weeks 0-8) May D/C brace at 8 weeks with good quad control. Brace can be unlocked to sitting.
- TTWB for 2 weeks then gradually increase weight bearing to FWBAT by 8 weeks postoperatively at surgeon’s discretion
- Avoid any varus stress on the knee, do not allow patient to cross their legs, etc.

PHASES & TIME LINES	REHABILITATION GUIDELINES	GOALS
Phase I 0 – 8 Weeks	<ul style="list-style-type: none"> <li>• ROM goal: 90° at 2 weeks postop</li> <li>• ROM goal 135° at 6 weeks postop</li> <li>• Patella mobilizations</li> <li>• Begin scar massage once incision is healed</li> <li>• Modalities: Electrical stimulation/muscle re-education, Pain/edema mgmt (cryotherapy)</li> <li>• Strengthening: quad/hamstring/glute isometrics, straight leg raises in all directions, active knee extension</li> <li>• Avoid closed chain exercises</li> <li>• 4-Way hip strengthening</li> <li>• Stationary Bike with no resistance until weightbearing restrictions allow</li> <li>• UBE, aquatic therapy (once incisions are healed)</li> <li>• Weight shifting when weightbearing restrictions allow</li> </ul>	<ul style="list-style-type: none"> <li>• Pain/Edema control</li> <li>• Protection of repair and/or recon.</li> <li>• Full passive ROM</li> <li>• Good quad control</li> </ul>
Phase II 8-12 Weeks	<ul style="list-style-type: none"> <li>• ROM goal: full passive and active extension and flexion</li> <li>• Modalities: Electrical stimulation/muscle re-education, Pain/edema mgmt (cryotherapy)</li> <li>• Scar massage</li> <li>• Gait retraining</li> <li>• Strengthening: straight leg raises with weight, active knee extension, hamstring curls.</li> <li>• Closed Chain: toe raises, wall sits, squats, step ups</li> <li>• 4-Way hip strengthening with weight</li> <li>• Leg press 0-70°</li> <li>• Stationary Bike, Elliptical trainer, stair stepper</li> <li>• Aquatic therapy</li> <li>• Balance/Proprioceptive training</li> <li>• Core stabilization</li> </ul>	<ul style="list-style-type: none"> <li>• Full active and passive ROM</li> <li>• Quadriceps control obtained</li> <li>• Normalize gait</li> </ul>
Phase III 12-16 Weeks	<ul style="list-style-type: none"> <li>• Strengthening: progressive resisted exercises, continue closed and open chain exercises avoiding knee extension machine</li> <li>• Begin treadmill jogging</li> </ul>	<ul style="list-style-type: none"> <li>• Increase ambulation and standing endurance</li> </ul>

	<ul style="list-style-type: none"> <li>• Stationary bike, elliptical trainer, stair stepper</li> <li>• Balance/Proprioceptive Training</li> </ul>	
Phase IV 4-6 Months	<ul style="list-style-type: none"> <li>• Continue jogging, begin light sprinting in straight line</li> <li>• Avoid any pivoting or twisting</li> <li>• Strengthening: progressive resisted exercises, continue closed chain exercises and begin open chain exercises avoiding knee extension machine</li> <li>• Stationary bike, elliptical trainer, stair stepper</li> <li>• Aquatic therapy</li> </ul>	<ul style="list-style-type: none"> <li>• Near full strength</li> <li>• Increase strength and endurance</li> </ul>
Phase V 6 Months	<ul style="list-style-type: none"> <li>• Running/sprinting program</li> <li>• Jump training/plyometric training</li> <li>• Begin light pivoting/twisting/cutting</li> <li>• Strengthening: continue progressive resisted exercises with no restrictions although avoid knee extension machine</li> <li>• Stationary bike, elliptical trainer, stair stepper</li> <li>• Aquatic therapy</li> </ul>	<ul style="list-style-type: none"> <li>• Strength 90% of contra lateral knee</li> <li>• Proper jump and landing technique</li> <li>• Return to pain-free sport specific training</li> </ul>