Pre-Op Instructions
- Instructions in immediate postoperative exercise/hospital course
- CPM instruction (if prescribed by doctor)
- Gait Training instruction-WBAT

1-3 Days Post-Op
- WBAT with crutches
- Hinged Brace (or knee immobilizer) Guidelines:
  - Locked in extension while walking or sleeping 2 weeks BTB, 3 Weeks H/S
  - Wear unlocked until 6 weeks (or physician removes brace) when walking
- Quad and hamstring isometrics
- SLR's (no weight)
- PROM- Gravity assisted knee extension (prone), and knee flexion (sitting or supine \(<=90^\circ\))
- Standing weight shifts (forward/back & side/side)
- Patellar mobilizations
- Electrical stimulation for poor quad contractions or pain relief
- Cold therapy unit for effusion control
- CPM (0-45\(^\circ\) while in hospital)

Goals at End of Recovery Phase (7-10 Days)
- FWB without pain (may vary with meniscus)
- D/C crutches
- Criteria for full weight bearing without crutches
  1. Satisfactory pain management
  2. Full knee extension standing
  3. No PF complaint of pain
  4. Independent quad set and co-contraction for control
  5. Minimal or no complaints of PF grafting/crepitus
  6. Normalized gait pattern (ELS unlocked when good quad contro)

Independent quad and has sets
- ROM as tolerated (For hamstrings; do not manually stretch past 0-90\(^\circ\) first two weeks, 120\(^\circ\) one month)
- Independent with all ADL’s
- Start proprioceptive exercises in 10-15\(^\circ\) knee flexion (dyna-dics, AE foam, etc.)

2-3 Week Post-Op
- Continue ROM work, patellar mobilization
- Stationary biking/Elliptical machine 5 minute maximum (light resistance)
- Unilateral leg press (light resistance)
- Hamstring curls (weight as tolerated)
- Closed kinetic chain activities (partial squats, wall slides, short step-ups)
- Calf raises
- Balance activities (in brace)
- Scar massage
- Achilles/ Hamstring stretches
4 Weeks Post-Op
Swimming (flutter kicks)
Balance activities (out of brace)

6 Weeks Post-Op
Max quad isometrics (50°, 70°, 90°)
May start active extension (open chain/ no PRE’s)
D/C brace (if indicated by physician)

8 Weeks Post-Op
Continue ROM work (goal: Full Flex)
Lunges and jump rope
Limited arc (90° & 45°) hamstring isokinetics
Start box jumps (6° or less) if good quad control present (NO lateral jumping)

The emphasis and preference is on closed-chain exercises. If necessary, due to facilities that are available to
the patient, limited arc (90° to 45°) quad exercises may begin at 10 week post-op. Monitor PF and patellar tendon
symptoms.

10-12 Week Post-Op
Progress plyometrics and weight training
Increase speed and duration of jogging
Begin lateral movement activities
Jogging (if good quad control/ minimal effusion)
Emphasize strength

14-16 Weeks Post-Op
Agility drills
Early sport specific activity
Walk/jog/run progression
Emphasize strength

Goals at 4-6 Months Post-Op
No pain or effusion with activity
No difficulty with functional activities
Based on clinical exam, functional performance and isokinetic testing, begin:
  - Return to sport specific activities after 4 months
  - Maintenance program at return to unlimited activity
D/C criteria:
  - Functional performance test is within 90% involved vs. uninvolved leg
  - Full ROM and strength, and full functional activities
  - Doctor has cleared the patient

**ACL Reconstruction With Meniscal Repairs**

1. Crutches/weight bearing
   PWB: immediate post-op to 2 weeks
   WBAT: 3-4 weeks
   D/C crutches: 4 Weeks

2. Brace
   Wear full time, locked in extension when up, for 4 weeks
   Remove only for ROM exercises

3. ROM Exercises
   Initiate immediately post-op 0-90° for 4 weeks

4. Biking
   4 weeks with light resistance- May then increase as tolerated

5. Swimming
   6 weeks (flutter kick only)