



Sports Medicine Division

ANTERIOR CRUCIATE LIGAMENT (ACL) REVISION REHABILITATION PROTOCOL

The following is a protocol for postoperative patients following ACL reconstruction. The primary goal of this protocol is to protect the reconstruction while steadily progressing towards and ultimately achieving pre-injury level of activity. Please note this protocol is a <u>guideline</u>. Patients with additional surgery (i.e. collateral ligament repair, meniscal repair) will progress at different rates. Achieving the criteria of each phase should be emphasized more than the approximate duration. If a patient should develop an increase in pain or swelling or decrease in motion at any time, activity should be decreased until problems are resolved.

PHASE I: 0-2 WEEKS POSTOPERATIVE

GOALS:

- Full passive extension
- Flexion to 90 degrees
- Good quad control

AMBULATION, DRESSING, AND BRACE USE

Dressing – POD 1: Debulk dressing, TED Hose in place

- POD 2: Change dressing, keep wound covered, continue TED Hose
- POD 7-10: Sutures out, D/C TED Hose when effusion resolved

Brace x 6 weeks – Locked in extension for ambulation

 Open to available range when pt has good quad control (no extensor lag).

Crutches – Partial weight bearing (PWB) in brace

EXERCISES:

Patellar mobilization (teach patient)
Calf pumping

AAROM 0-90 degrees (passive extension, active flexion, heel slides)

Passive extension with heel on bolster or prone hangs

Electrical stimulation in full extension with quad sets and SLR

Quad sets, Co-contractions quads / Hamstring Straight leg raise (SLR) x 4 on mat (in brace if poor quad control)

Total Gym (level 3-5) – Mini squats 0-45 degrees

Passive flexion to 90 degrees max (push up with opposite leg)

Leg press 0-45 degrees with light resistance (up to ¼ body weight)

Hamstring curls - Standing

Stationary bike for range of motion – Complete cycle as able

Ice Pack with knee in full extension after exercise

PHASE II: ~2-4 WEEKS POSTOPERATIVE GOALS:

- ROM 0-110 degrees
- No effusion
- No extensor lag

AMBULATION AND BRACE USE

Brace x 6 weeks – Open to available range Crutches – PWB in brace

EXERCISES:

Continue appropriate previous exercises and following ex without brace

Scar massage when incision healed

AAROM, AROM through full range as tolerated SLR x 4 on mat – Add light ankle weights if quad control is maintained

Total Gym – Progress levels and ROM of minisquats as tolerated

Leg press 0-60 degrees with light resistance (up to ¼ body weight)

Hamstring curls – Carpet drags or rolling stool (closed chain)

Double leg heel raises







Stationary bike – Progressive resistance and time

Stretches – Hamstring, Hip Flexors, ITB

Treadmill – Forwards and backwards walking Stationary bike – 15-20 minutes at a time, at least 70 rpm

PHASE III: ~4-6 WEEKS POSTOPERATIVE

GOAL: Full ROM

AMBULATION AND BRACE USE:

Brace x 6 weeks – Open to available range Crutches – PWB in brace

EXERCISES:

Continue appropriate previous exercises PROM, AAROM, AROM to regain full motion Weight shifts

Mini squats 0-60 degrees – In parallel bars Leg press 0-60 degrees with light resistance (up to ½ body weight)

Hamstring curls on weight machine with light resistance

PHASE IV: ~6-9 WEEKS POSTOPERATIVE

GOAL: Normal Gait

AMBULATION AND BRACE USE:

D/C Brace

Crutches – weight bearing as tolerated (WBAT), D/C when gait is WNL

EXERCISES:

Continue appropriate previous exercises Standing SLR x 4 with light Theraband bilaterally Wall squats 0-45 degrees, progress to single leg Leg press 0-60 degrees with resistance as tolerated

Hamstring curls with resistance as tolerated Forward, lateral and retro step downs in parallel bars

No knee flexion past 45 degrees (small step)
 Single leg heel raises

Proprioceptive training – Single leg standing in parallel bars

- Double leg BAPS for weight shift

PHASE V: ~9-12 WEEKS POSTOPERATIVE

GOAL: Walk 2 miles at 15 min/mile pace

EXERCISES:

Continue appropriate previous exercises with progressive resistance
Wall squats 0-90 degrees
Leg press 0-90 with resistance as tolerated
Forward, lateral and retro step downs (medium to large step)

Hip weight machine x 4 bilaterally Proprioceptive training – Single leg BAPS, ball toss and body blade

- Grid exercises

Treadmill – Walking progression program
Elliptical trainer
Pool therapy – Walking / running (no kicking)

PHASE VI: ~3-4 MONTHS POSTOPERATIVE

GOAL: Walk 3 miles at 15 min/mile pace

EXERCISES:

Continue appropriate previous exercises
Fitter
Slide board
Stairmaster – Small steps
Pool therapy – No swimming laps

PHASE VII: ~4-6 MONTHS POSTOPERATIVE

GOAL: Equal thigh girth

EXERCISES:

Continue appropriate previous exercises
Knee extension weight machine
Short arc quads
Functional activities – Figure 8s, gentle loops,
large zigzags
Pool therapy – Swimming laps
Quad stretches







PHASE VIII: ~6-9 MONTHS POSTOPERATIVE

GOALS: Return to all activities

EXERCISES:

Isokinetic testing at 180 and 300 degrees/sec – Must have 80% of opposite leg to clear for straight line running Continue appropriate previous exercises Home/gym program Agility drills / Plyometrics Sit-up progression Treadmill – Running progression program if cleared Transition to home / gym program

No contact sports until 12 months post-op