

Physical Therapy Pre-Operative & Non-Operative Protocol ACL Tear

Information:

The following is the Steadman Hawkins Denver Clinic preoperative protocol. The main emphasis focuses on:

1. Reducing inflammation
2. Restoring full range of motion
3. Restoring quadriceps function

You will likely be ready for surgery following phase I/II or in about one to two weeks. If your surgery date is beyond that time frame, you will progress through Phase II and onto Phase III. Maximizing your range of motion and strength pre-operatively will positively influence your post-operative results.

Phase I – Inflammatory Phase:

- Modalities to control inflammation
 - Prescription anti-inflammatories
 - Ice
 - Clinical modalities to control inflammation
- Cardiovascular Exercises
 - Stationary bike-focus on restoring range of motion
 - Pool program as indicated
- Begin range of motion exercises
 - Seated flexion/extension off of table
 - Wall slides
 - Heel slides
- Begin VMO and quadriceps strengthening
 - Quadriceps setting
 - Multi-plane straight leg raising
 - Open kinetic chain multi-plane hip strengthening
- Gait training; protected weight-bearing as instructed

Phase II – Subacute and Early Strengthening:

- Continue with appropriate Phase I activities
- Continue to work toward full range of motion
- Advance strengthening program
 - Proprioception exercises
 - Closed kinetic chain squat program
 - Closed kinetic chain unilateral squats, dips, and step-up progression
 - Closed kinetic chain multi-plane hip strengthening
- Advance intensity and duration of stationary biking program. May add treadmill walking as swelling permits, avoid running and impact activity.

Phase III – Advanced Strengthening:

- Advance closed kinetic chain strengthening as appropriate
- Begin gym strengthening, avoid leg extensions and lunges

This protocol is intended to provide a general guideline to treating an ACL sprain. Progress should be modified on an individual basis

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