

Brian P. Davis, MD Sports Medicine, Shoulder, Knee, & Elbow Surgeon office: 303.449.2730

# MPFL RECONSTRUCTION/PROXIMAL REALIGNMENT POST OPERATIVE PROTOCOL

Weight Bearing
□ NWB x wks
□ TDWB x wks
□ PWB% x wks
□ WBAT
☐ Brace Locked in Ext x wks
ROM
☐ Full ROM
☐ Locked full ext xwks
□ Locked at ° x wks

to xwks
° to° xwks
° to° xwks
СРМ
□° to° xwks
□ 30-70° increase 10°/d @ dir
□ None

☐ ROM limits

WB: TDWB x 1 weeks
WBAT week 2
BRACE: Locked 0°/0°
x 6 weeks w/ ambulation
ROM: 0°-30° week 1-4
0°-60° week 5
0°-90° week 6

□ Recommended Clinical Guidelines

0 -90 Week 6
□ Precautions

# Estimated Return to Sport:

# Phase I - Tissue Protection/Healing Phase (0-4 weeks)

#### GOALS:

- 1) Reduce pain
- 2) Reduce effusion
- 3) minimize scar adhesion formation
- 4) Achieve full knee extension ROM
- 5) Facilitate quadriceps activation
- 6) Protect from excessive patellar lateral stress or genu valgus stress

#### ROM

PROM/AAROM/AROM (0°-MD prescribed limit)

#### **EXERCISE:**

Multiangle Quad Isometrics (per ROM limits)

SLR ABD/add/ext (brace locked)

Calf Raises

Single Limb Stance

#### MANUAL:

Patella Mobilizations (caution lateral glide)

Soft Tissue Mobilization patellar tendon

#### MODALITIES:

Functional Electrical Stimulation (not directly on the VMO)

Biofeedback

Cryotherapy

# Criterion for Progression:

- 1) Voluntary quadriceps isometric contraction
- 2) Full knee extension AROM
- 3) Knee ROM 0°-30°

# Phase II - Tissue Proliferation Phase/Progression Phase (5-8 weeks)

# GOALS:

- 1) Pain and edema control
- 2) Minimize scar adhesion formation
- 3) Improve knee AROM
- 4) Strength progression-develop functional guad control
- 5) Normalize gait pattern

#### ROM:

PROM/AAROM/AROM

Stationary Bike for ROM

#### **EXERCISE:**

SLR flexion (brace locked)

Side lying hip ABD/ER

Wall Sits (30°)

WB Terminal Knee Extension (30°-0°)

Open Chain Knee Ext (90°-30°)

Open Chain Knee Ext (90 -90°)

Closed Chain knee flex/ext (80°-0°)

Step up/down

Balance Board/Wobble Board (Bilateral)

# MANUAL:

Initiate Scar mobilization

# **MODALITIES:**

Patellar taping; medial glide

# CV EXERCISE:

Bike, Elliptical, Stair climber (ROM permitting)

Swimming-flutter kick only



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# Criterion for Progression:

- 1) Minimal to no effusion/edema
- 2) Knee ROM 0°-90° by week 6
- 3) Full patellar mobility
- 4) No extensor lag with SLR
- 5) Ambulate on level surfaced without brace with quad control

# Phase III - Tissue Remodeling/Hypertrophy Phase (9-18 weeks)

#### **GOALS**

- 1) Full knee AROM
- 2) Improve eccentric quad control
- 3) Initiate advanced SL proprioception activities and lateral motion
- 4) Strength progression
- 5) Begin light jogging week 16

#### ROM:

ROM to full

#### **EXERCISE:**

Initiate lateral motion

Single limb balance with perturbations

#### **CV Exercise:**

Initiate jogging by week 16

# Criterion for Progression:

- 1) No edema/effusion
- 2) Full ROM
- 3) 20 reps to 60 degrees single limb squat with eccentric control and good lower extremity alignment
- 4) Quad strength >80% of uninvolved LE (10RM single leg press or isokinetically if available)
- 5) Jogging without pain or antalgic gait

# Phase IV - Sport Specific Training (19-24)

### GOALS:

- 1) Begin sport specific drills
- 2) Normalize neuromuscular control
- 3) Normalize jumping/landing mechanics if indicated
- 4) Prepare to return to sport

#### **EXERCISE:**

Progress on running progression

Begin agility progression

Begin plyometric progression

Progress on sport specific training

Swimming – initiate whip kick/breast stroke (week 24)

Cutting sports and Golf (week 24)

# Criterion for Return to Sport:

(Recommend combination testing of strength, agility, and power according to available resources/clinic setting)<sup>3</sup>

- 1) Lower Extremity Functional Test (LEFT)
- 2) Hop Tests Single Hop, X-Hop, Triple Hop, Timed Hop >=85% uninvolved
- 3) Single leg squat to 60 degrees knee flexion with good control for 3 minutes
- 4) Quad strength > 90% of uninvolved (10RM leg press or isokinetic testing)
- 5) IKDC (MCID 6.3@ 6mo; 16.7 @ 12 mo)