Department of Orthopedic Surgery -Sports Medicine University of Colorado School of Medicine www.RachelFrankMD.com





Physical Therapy – ACL, PCL and Posteolateral Corner Reconstruction

Name:	Date of Surgery:
Procedure: R / L ACLR, PCLR and PLC Reconstruction	
Frequency: 2-3 times per week	

PHASE I (Weeks 0 - 6): Period of protection, decrease edema, activate quadriceps

- Weightbearing: Toe touch/Heel touch 25% weight bearing
 - o Unless otherwise instructed by Dr. Frank and team
- Hinged Knee Brace:
 - Locked in full extension for ambulation and sleeping (weeks 0-2)
 - Unlocked to 90 degrees for ambulation and removed while sleeping (weeks 2-6)
- Range of Motion:
 - Light range of motion 0-45 degrees(weeks 0-2)
 - o Progress range of motion 0-90 degrees(weeks 0-6)
- Therapeutic Exercises: Quad sets, patellar mobilization, Gastroc/Soleus stretching, Straight-leg raises in brace, Side-lying hip/core
 - **Avoidance of hamstring activation for 6 weeks post op
- Modalities: Per therapist, including electrical stimulation, ultrasound, heat (before), ice (after)

Phase II (Weeks 6-12)

- Weightbearing: May advance 25% weight bearing every 3-4 days until full weight bearing at 8 weeks
 Full weight bearing at 8 weeks plus.
- Hinged Knee Brace: Discontinue once full extension achieved with no evidence of extension lag
- Range of Motion: Maintain full knee extension, work on progressive knee flexion to full.
- Therapeutic Exercises: Continue Phase I exercises.
 - Begin calf raises, closed chain quad/hamstring, balance exercises, hamstring isometrics and progress to hamstring curls, stationary bike, step-ups, front and side planks, advance hip/core.
- Modalities: Per therapist, including electrical stimulation, ultrasound, heat (before), ice (after)

Phase III (Weeks 12 - 16)

- Range of Motion: Full, painless
- Therapeutic Exercises: Advance closed chain strengthening exercises and proprioception activities
 - o Begin use of the Stairmaster/Elliptical at 12 weeks
- Modalities: Per therapist, including electrical stimulation, ultrasound, heat (before), ice (after)

Phase IV (Weeks 16 - 24): Gradual return to athletic activity

- 16 weeks: Begin jumping
- 20 weeks: Advance to sprinting, backward running, cutting/pivoting/changing direction
- 24 weeks: Consider functional sports assessment

Phase V (>6 months): Gradual return to athletic activity

- Gradual return to sports participation after completion of functional sports assessment
- Encourage maintenance program based off functional sports assessment

Signature: Date:	
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