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

OFFICIAL HEALTH CARE PARTNER













Physical Therapy Prescription – MPFL Reconstruction and Tibial Tubercle Osteotomy

Name:	Date of Surgery:
Procedure: R / L MPFL Reconstruction and TTO	
Frequency: 2-3 times per week	

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

- Weightbearing: Toe-touch/Heel-touch weight-bearing with crutches
- Hinged Knee Brace: Locked in full extension for ambulation and sleeping(remove for PT)
 - Weeks 2-6: Unlock at 0-90° for all activities, remove when sleeping
- Range of Motion: Initiate ROM 0-30°, gradually advance with PROM and AAROM
- Therapeutic Exercises: Gentle patellar mobs, quad/hamstring sets, heel slides, prone hangs, straight-leg raises with brace in full extension until quad strength prevents extension lag
- Modalities: Per therapist, including electrical stimulation, ultrasound, heat (before), ice (after)

Phase II (Weeks 6 - 12)

- Weightbearing: Advance 25% weekly until full WB with normalized gait pattern
- Hinged Knee Brace: Wean between 6-8 weeks; discontinue completely once good guad control
- Range of Motion: Progress to full AROM, with goal of 90° by week 6, then advance as tolerated
- Therapeutic Exercises: **No weight-bearing exercises with knee flexion angles >90°**
 - Advance closed chain strengthening exercises and proprioception activities; begin wall sits and lunges; begin stationary bicycle(Weeks 6-12)
- Modalities: Per therapist, including electrical stimulation, ultrasound, heat (before), ice (after)

Phase III (Weeks 12 - 16)

- Weightbearing: Full
- Hinged Knee Brace: discontinue; consider using of patella stabilizing knee sleeve
- Range of Motion: Full, painless
- Therapeutic Exercises: Advance closed chain strengthening; advance plyometrics; advance proprioception training; begin elliptical and/or treadmill jogging
- Modalities: Per therapist, including electrical stimulation, ultrasound, heat (before), ice (after)

Phase IV (Weeks 16 - 24)

Advance Phase III exercises; focus on core/glutes; progress flexibility and strengthening; maximize single leg dynamic and static balance and strength; initiate light plyometrics; improve treadmill walking

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

- Advance Phase IV exercises; focus on single leg dynamic and static balance
- Return to sport-specific activity and impact when cleared by MD at 6 months postop

Signature:	Date:	