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

#### OFFICIAL HEALTH CARE PARTNER













# Physical Therapy Prescription – Posterior Cruciate Ligament Reconstruction

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

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

- Weightbearing: WBAT in brace locked in extension with crutches
  - Okay to unlock brace at week 4 if good guad control
  - May be modified if posterolateral corner reconstruction, meniscus repair/transplant or articular cartilage surgery performed at time of PCLR
- **Hinged Knee Brace:** 
  - Weeks 0-2: Locked in full extension for ambulation and sleeping (remove for PT)
  - Weeks 2-4: Locked in full extension for ambulation, remove for sleeping
  - Weeks 4-6: Unlock at 0-90° for gait training/exercises
- Range of Motion: None week 0-1; then initiate PROM only with goal of 90° of passive flexion by week 6 take care to prevent posterior sagging during ROM exercises
- Therapeutic Exercises: Calf pumps, gentle patellar mobs, quad sets, SLR in brace locked in extension, standing hip extension, hamstring/calf stretching
- Modalities: Per therapist, including electrical stimulation, ultrasound, heat (before), ice (after)

### Phase II (Weeks 6 - 12)

- Weightbearing: Full, wean crutches as able
- Hinged Knee Brace: Unlock for all activities; discontinue completely at week 8 if good guad control
- Range of Motion: Progress to AROM, progress to full ROM by week 12
- Therapeutic Exercises: Advance Phase I exercises, advance floor-based core/glute exercises; SLR without brace if good quad control, increase closed chain activities 0-60° by week 8 and 0-90° by week 12 (wallslides, mini-squats, leg press), initiate balance and proprioception exercises
  - Begin gentle stationary bicycle at 8 weeks
- Modalities: Per therapist, including electrical stimulation, ultrasound, heat (before), ice (after)

### Phase III (Weeks 12 - 16)

Advance Phase II exercises, advance closed chain quad exercises, work on functional balance and core strengthening; progress balance/proprioception exercises, start slow treadmill walking and progress to jogging

### Phase IV (Weeks 16 - 24)

Advance Phase III exercises; maximize single leg dynamic and static balance and strength; initiate light plyometrics; begin jumping at 16 weeks; advance to sprinting, cutting, and pivoting at 20 weeks

## 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
- Return to sport-specific activity and impact when cleared by MD at 6+ months postop

Signature:	Date:
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