Department of Orthopaedic Surgery Sports Medicine and Shoulder Service

Knee LCL / Posterolateral Corner Repair-Reconstruction Rehab Protocol

Patient Name: Date:

Diagnosis: LCL, PLC tears Freque**B**C 23**()₹** r

progress 1 -2 lbs per week Hamstring active knee flexion OK Seated leg extension (90 to 40 degrees) against gravity with no weight Hip adductor, flexor strengthening

Week 8 (TTWB)

Continue all exercises

Flexion exercises seated AAROM

AAROM (using good leg to assist) exercises (4-5x/ day) with brace on

Continue ROM stretching and overpressure into extension

SLR's - with brace on

Leg press 0-70 arc of motion

Week 9 (WBAT)

Continue above exercises

Start WBAT with brace on in full extension and D/C crutches when stable

Unlock brace for ambulation when quad control adequate

Hamstring and calf stretching

Self ROM 4-5x/day using other leg to provide ROM

Advance ROM as tolerated - no limits, may remove brace for ROM

Regular stationary bike if Flexion > 115°

Heel raises with brace on

Hip/core strengthening and proprioception training

Week 10

Continue above exercises

Mini squats (0-60 degrees) and quad strengthening

4 inch step ups

Isotonic leg press (0 - 90 degrees)

Lateral step out with therabands

Advance hip/core strengthening and proprioception training

Week 11

• D/C brace if quad control adequate

Advance ROM, Goal: 0 to 115 degrees, walking with no limp

Add ball squats

Initiate retro treadmill with 3% incline (for quad control)

Increase resistance on stationary bike

Mini-squats and weight shifts

Sport cord (bungee) walking

8 inch step ups

4 inch step downs

Week 12

Begin resistance for open chain knee extension

Swimming allowed, flutter kick only

Bike outdoors, level surfaces only

Progress balance and board throws

Plyometric leg press

6-8 inch step downs

Start slide board

Jump down's (double stance landing)

Progress to light running program and light sport specific drills if:

Quad strength > 75% contralateral side

Active ROM 0 to > 125 degrees

Functional hop test >70% contralateral side

Swelling < 1cm at joint line

No pain

Demonstrates good control on step down

Week 12-22

Stairmaster machine

Progress to light running program and light sport specific drills if:

Isometric extensor limb symmetry index (LSI)>70% plus extensor and flexor LSI>70%

Active ROM 0 to > 125 degrees

Functional hop test >70% contralateral side

Swelling < 1cm at joint line

No pain

Demonstrates good control on step down

6-12 months

Criteria to return to sports (functional testing at 6 mos, then at 9 mos)

Full Active ROM

Quadriceps >90% contralateral side

Satisfactory clinical exam

Functional hop test > 90% contralateral side

One Year

Doctor visit