## **Rehabilitation Protocol:**

## Medial Patellofemoral Ligament (MPFL) Reconstruction

## OMAR RAHMAN, MD, MBA

## Orthopedic Surgeon | Sports Medicine





Diagnosis:	·	Date of Surgery:	
Phase I (W	/eeks 0-2)		
•	Weightbea	Weightbearing: Weightbearing as tolerated with brace	
	Hinged Kn	Knee Brace	
	0	Locked in full extension for ambulation and sleeping	
Range of		lotion - PROM/AAROM	
Therapeutic Exercises		ic Exercises	
	0	Quad/Hamstring sets	
	0	Heel slides/Prone hangs/Patellar mobilization	
	0	Straight-Leg Raise with brace in full extension until quad strength prevents extension lag	
Phase II (V	Weeks 2-6)		
•	Weightbea	ring: As tolerated – wean from crutch use	
	0	Hinged Knee Brace: Unlocked	
•	Range of M	otion - PROM/AAROM/AROM: Maintain full knee extension - work on progressive knee flexion (goal of 90 degrees by week 6)	
•	Therapeutic Exercises		
	0	LIMIT WEIGHBEARING EXERCISE TO FLEXION ANGLES < 90 DEGREES	
	0	Isometric quadriceps strengthening	
	0	Heel slides/Prone hangs	
	0	Patellar mobilization	
Phase III (	Weeks 6-12)		
•	Weightbea	ring: Full weightbearing without crutches	
	0	Discontinue Knee Brace - Convert to Patellar Stabilization Sleeve (Reaction Brace)	
•	Range of M	lotion – Advance to Full/Painless ROM	
•	Therapeut	ic Exercises	
	0	Wall sits/Lunges	
	0	Proprioception training	
	0	Stationary bicycle	
Phase IV (	Months 3-4)		
•	Advance clo	Advance closed chain strengthening – leg press, leg curls	
•	Plyometric	lyometric and proprioception training	
•	Treadmill j	ogging/Elliptical	
Phase V (N	Months 4-6)		
•	Gradual ret	Gradual return to athletic activity as tolerated	
•	Maintenand	e program for strength and endurance	
Comments	S:		
Frequency: 2-3 times per week Duration: 6-8 weeks			
Signature:			
Date:		_	