

# NewportCare Medical Group

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## PCL RECONSTRUCTION REHABILITATION PROTOCOL

	WEIGHT BEARING	BRACE	ROM	THERAPEUTIC EXERCISES
<b>PHASE I</b>				
<b>0 - 2 weeks</b>	Toe touch weight bearing	Locked in full extension	0-90	Quad sets, ankle pumps, SLR, hip ab/adduction, hamstring/calf stretch, calf press with theraband, patellar mobilization
<b>2-4 weeks</b>	Advance to full	Unlocked for PT and ambulation	passive only** to tolerance	Add chair slides, passive ROM in prone position
<b>PHASE II</b>				
<b>4 - 12 weeks</b>	Progress to full	<b>4-6 weeks:</b> unlocked for all activities <b>6 weeks:</b> discontinue use with good control and no extension lag	Maintain full extension and progressive flexion	<b>4-8 weeks:</b> gait training, wall slides, mini-squats, resisted hip exercises in standing*** <b>8-12 weeks:</b> stationary bike with light resistance (to begin) and seat higher than normal, closed chain terminal knee extensions, Stairmaster, balance and proprioception activities, leg press (limiting knee flexion to 90 ), open chain quad ranging from 0 - 90 degrees
<b>PHASE III</b>				
<b>12 weeks - 4 months</b>	Full, without use of crutches and with a normalized gait pattern	None	Gain full and pain-free	Advance closed chain strengthening, progress proprioception and balance activities, maintain flexibility
<b>4 mo - 7 mo</b>	Full	None	Full	Treadmill walking, advance to jog Add hamstring curls for strengthening Progress to sprinting and cutting with functional progress
<b>PHASE IV</b>				
<b>7 months and beyond</b>	Full	None	Full and pain-free	Maintain strength, endurance, and function, begin sport-specific functional progression (backward running, cutting, grapevine, etc.), progress running, initiate a plyometric program Return to sports in PCL brace until 1 year post-op

\*\*Maintain anterior pressure on proximal tibia as knee is flexed - prevent posterior sagging at all times

\*\*\*Resistance must be proximal to knee with hip ab/adduction exercises