

REVISION ACL RECONSTRUCTION WITH CONTRALATERAL PATELLAR TENDON AUTOGRAFT REHABILITATION PROTOCOL

	WEIGHT BEARING	BRACE	ROM	EXERCISES
PHASE I 0-4 weeks	Full in Brace	0-2 week: Locked in full extension for ambulation on harvest side knee; recipient knee immobilizer only 0-2 wks at night* 2-4 weeks: Unlocked for ambulation and worn on harvest knee only -remove for sleeping**	As tolerated	Heel slides, quad/hamstring sets, patellar mobs, gastroc/soleus stretch SLR w/ brace in full extension until quad strength prevents extension lag Side-lying hip/core
PHASE II 4-12 weeks	Full	Discontinue at day 28	Full	Begin toe raises, closed chain quads, balance exercises, hamstring curls, stationary bike, step-ups, front and side planks; advance hip/core
PHASE III 12-16 weeks	Full	None	Full	Advance closed chain strengthening Progress proprioception activities Begin stairmaster, elliptical and running straight ahead at 12 weeks
PHASE IV 16-24 weeks	Full	None	Full	16 wks: Begin jumping 20 wks: Advance to sprinting, backward running, cutting/pivoting/changing direction, initiate plyometric program and sport-specific drills 22 wks: Advance as tolerated FSA completed at 22 wks***
PHASE V > 6 months	Full	None	Full and pain-free	Gradual return to sports participation after completion of FSA Maintenance program based on FSA

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*Recipient knee does not require brace during day at all, unless concomitant meniscus repair done. Immobilizer on recipient knee is worn only at night to retain full extension and may be off during the day.

Donor knee does not require brace at nighttime at all; hinged brace daytime locked in extension 0-2 wks and then unlocked 2-4 wks.

Modified with concomitantly performed meniscus repair/transplantation or articular cartilage procedure

**Immobilizer may be removed for sleeping after first post-operative visit if no flexion contracture remains

***Completion of FSA (Functional Sports Assessment) not mandatory, but recommended at approx 22 wks post-op for competitive athletes returning to play after rehab

