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Physical Therapy Prescription LCL / PLC Repair/Reconstruction

Patient Name:

Date:

Surgery Date:

DOB:

Sex:

Dx: s/p (LEFT / RIGHT) LCL / PLC Repair

WEEKS 0-2 – Avoid all varus load

- * Brace on at all times locked in full extension – use crutches
- * Passive motion only – No flexion x 2 weeks – PASSIVE EXTENSION ONLY
- * Cryotherapy
- * Quad sets in brace
- * Non-weight bearing at all times in the brace
- *Electrical Stimulation to Quad if poor control
- ***Brace on at all times through week 12**

WEEKS 2-6 – Avoid all varus load

- * Brace on at all times – use crutches. May begin TTWB at 2 weeks post op (Brace can be unlocked with TTWB)
- * Continue to use crutches x 6 weeks. May increase WB based on pain. Must use brace.
- * Advance passive and passive-assisted range of motion as tolerated with goal of full flexion by week 6-8
- * Cryotherapy as need for pain/soreness
- * Straight leg raises daily (up to 300-500 reps) in the brace. Quad sets okay.
- * Electrical Stimulation to Quad if poor control
- * **Brace on at all time through week 12 – Patient must have full extension and 130+ degrees of motion prior to beginning LE PUSH and Hinge movements**

WEEKS 6-12 – Avoid all varus load

May change to small brace at this point. Brace on at all times when weight bearing.

- * Active motion as tolerated
- * Weight bearing: Begin weight-bearing with no restrictions and advance as tolerated IN SMALL BRACE
- * Stationary bike - minimal resistance up to 20 minutes, up to 3 x daily
- * Leg press at max 25% body weight from full extension to 70 degrees of knee flexion only
- * Begin CKC strengthening progressing to full arc – Push and hip hinge variations
- * Sagittal plane motion only, no transverse or coronal plane motion

Goal: Full range of motion and normal gait pattern by 2.5 months

***Brace on at all times through week 12**



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WEEKS 12-24

- Patellar Mobilization
- Progressive overload of 2 exercises below. Must continue to increase resistance/load while allowing enough time for recovery
 1. Squat/Push variations and examples: Back squat, step up, Hex bar, Leg Press, Total Gym, Bulgarian SS, etc.
 2. Hip hinge variations and examples – Deadlift, RDL, GHD, Good mornings, Bridging, Hip thrusters, Nordic HS, etc.
- May begin lateral movements – Start at slow speeds and no resistance. Gradually increase based on dynamic knee control
- OK to walk on treadmill for exercise (forward) & slow retrostep
- Continue bike. No restrictions.
- May begin jogging at 12-14 weeks if eccentric step down is symmetric from 8''

WEEKS 24-40

- No limits on lifting exercises
- Agility drills
- Advanced functional exercises
- Progress running program - cutting
- Plyometrics can begin

Frequency & Duration: (circle one) 1-2 2-3 x/week for ____ weeks

**Please send progress notes.

Physician's Signature: _____ **M.D.**