

Department of Orthopaedic Surgery
Sports Medicine and Shoulder Service

Knee LCL / Posterolateral Corner Repair-Reconstruction Rehab Protocol

Patient Name:

Date:

Diagnosis: LCL, PLC tears

Frequency: BC 2361 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

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