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### FCL Reconstruction Post-Operative Rehabilitation Protocol

#### 0-6 weeks

- NWB for 6 weeks with crutches
- Brace locked in extension for ambulation and sleeping x 6 weeks
- Avoid tibial rotation, hypertension and varus force to the knee
- ROM:
  - Wall slides/supine heel slide with strap
  - Seated knee flexion with contralateral LE assist
- Neuromuscular control:
  - Quad Set, Prone TKE, SLR in brace
  - Use of NMES if insufficient volitional quad activation.
  - Quad isometrics at 90, 60, 30 and 0° knee flexion S/L hip ABD in brace
  - Prone hip extension brace
  - Ankle mobility and resisted motions in all planes in supine, long sit or seated position.
  - Supine and seated core stabilization.
  - Seated/supine anti rotation/pallof
  - Supine core isometrics with UE and LE dissociative movements
- Criterion to progress
  - $\circ$   $\,$  Pain free ROM 0-90  $^{\circ}$
  - Pain/swelling controlled
  - SLR without extensor lag

#### 6-12 weeks

- No kneeling for 12 weeks post op
- Progress to PWB and then FWB/wean off assistive device
- Discharge crutches then brace when adequate quad activation/strength
- ROM:
  - Stationary bike
- Proprioception and balance:
  - Initiate balance training

#### Weight Bearing Status

NWB x 6 weeks

### Brace Settings

Locked straight x 6 weeks when ambulating or sleeping. Otherwise open brace once good quad control

ROM Restrictions

> PROM 0-90° beginning POD 1



#### Strengthening

- Closed chain functional exercise
- Mini squat, Step-up, lunging in sagittal plane (no flexion >70°)
- Bridge
- Side steps
- Keep band proximal to minimize varus force on knee
- Core strength and endurance

#### Criterion to progress:

- Pain free, non-antalgic gait without assistive device for limited distances
- PROM normalized to contralateral side 100%
- Dynamometry 80% compared contralaterally with muscle testing
- **12-20 weeks** Initiate transverse plane and multiplanar motions
  - Initiate plyometrics
  - Restore power
  - <u>Criterion to progress:</u>
    - Y-balance test >90%
    - 60 sec continuous SL squat to 60 deg without femoral and lumbo-pelvic compensations
    - Plank and side plank 60 sec without compensations
    - Dynamometry 90% compared contralaterally with muscle testing
    - Return to prior level of function with minimal symptoms

#### >20 weeks



- Alter G initiated at 20 weeks for running
- Full body running at 24 weeks
- Sport specific dynamic exercises
- Plyo Prep Screen when initiating running and/or
- jumping. Lower Body Assessment when initiating return to sport progression. Schedule via QR code email or spc@rushortho.com



Exercise	Week           1         2         3         4         5         6         7         8         9         10         12         16         20         24											
Initial Exercises:			ů	Ŭ			•				20 21	
ROM Goals	<b>0-90</b> °	0-90° 0-125°			Progress to full							
Flexion/extension- prone with brace				<u> </u>			Ŭ					
Flexion/extension- seated/ calf-assisted or prone												
Patella/Tendon mobilization												
Quad Series	0° ISOs, SLR 60			)° ISOs			70-3		F	ull arc ı	resisted	
Hamstring Sets						a	rc-resi	Isted				
Sit and Reach for Hamstrings (no hyperextension)												
Ankle Pumps												
Crutch weaning		NWB										
SLR (w/ brace until quad control restored)			_									
Toe and heel raises												
Balance Series												
Weight-bearing Strength Exercises:	1 2	3 4	5	6	7	8	9	10	12	16	20 24	
Double Knee Bends												
Double Leg Bridges												
Reverse lunge- static holds												
Beginning cord exercises	1	NWB										
Dead Lift (2 $\rightarrow$ 1)												
Squat/Leg Press (ISO →reps, 2→1 leg)					0-4	l5°	0-	70° (7	70° M	ax on	press)	
Sports Test Exercises												
Cardiovascular Exercises:	1 2	3 4	5	6	7	8	9	10	12	16	20 24	
Bike with both legs-no resistance												
Bike with both legs- resistance												
Aqua jogging												
Treadmill-walking 7% incline	1	NWB										
Swimming with fins-light flutter kick												
Elliptical Trainer												
Rowing												
Stair stepper												
*Cardio Exercises	Must tole pain/swe											
Agility Exercises:	1 2	3 4	5	6	7	8	9	10	12		20 24	
Running Progression*											•	
Initial-Single Plane	1	WB										
Advance-Multi Directional												
Functional Sports Test												
High Level Activities:	1 2	3 4	5	6	7	8	9	10	12	16	20 24	
Golf Progression												
Outdoor biking, hiking, running	1	NWB										
Return to Full Sport at 7-9 months post-op				1								

#### Quad Series:

- •Quad sets (5 sec hold) also quick contractions (NMES to supplement)
- Prone quad sets
- •SLR with no extension leg
- Progression of Quad Strengthening (WB exercises at 6 weeks)
- •LAQ in safe range -no added resistance to begin
- •Once weight bearing tandem stance TKE with 5 sec hold
- Isometric wall sit
- SLR with resistance
- •Step up progression
- Squat progression
- Leg press progression
- Lunge progression

#### Hamstring Series:

- •Hamstring stretching (supine/prone)
- •Hamstring set (heel dig)- contract hamstring with knee flexed pressing heel into the floor (5 sec hold)
- Hamstring curls
- Progress to resisted hamstring curl

#### Sport Test Exercises:

- •Goals: impact training and introduction of directional drills
- Double leg squat jumps
- •Box jumps
- Speed skaters
- Double leg jumps for height and distance progress to single leg as tolerated
- •Blaze pod change of direction drills

#### Further Clarifications and Considerations

- •Double Knee Bends: feet shoulder width apart, bend knees to 30<sup>o</sup>, keeping knees behind the toes.
- •Cord exercises (resistance band/cord): resisted double knee bends, resisted hamstring curls
- •May begin to implement BFR as early as 1 week into post-op period

# Return to Running Criteria

- •Trace effusion, flexion within 5 degrees of contralateral side
- LSI on anterior reach Y balance test ≥ 90%
- LSI on quadriceps torque output on isometric measurement ≥ 75%
- 12" SL squat tolerance
- Able to walk > 1 mile with no limping or pain
- Able to "hop" with UE assist on operative leg 5 times without pain or compensation
- •SL balance with eyes closed 30 seconds without loss of balance



Return to Agility/Change of Direction Criteria

- •Return to running criteria listed above met
- •No effusion
- •Full ROM
- •Quad LSI on isokinetic ≥85%
- Hamstring LSI on isokinetic ≥85%
- •LSI on anterior reach Y-balance  $\geq$  **95%**
- SL hopping pain-free and effusion free

## Return to Sport Criteria

- In order to test must demonstrate full AROM, no pain, no/trace effusion, 5/5 strength, negative lachman and pivot shift, LSI ≥95% hamstring curl and leg press
- •Quadricep strength ≥95% of contralateral side (< 2cm of atrophy)
- Able to perform single leg squat with correct form
  LSI SL hop ≥95%
- •Y-Balance ≥95% (mean of 3 trials in anterior, posterolateral, posteromedial /100)
- Vertical jump test, single leg hop distance, and timed single leg hop over 20 -feet ≥90% of contralateral side

