

Medial Patellofemoral Ligament Imbrication with Concomitant Lateral Release Rehabilitation Protocol

Phase I: Day 1 to 2 Weeks

Moderate to severe calf pain or shortness of breath should be reported immediately.

- Patient placed in a knee immobilizer in extension and issued Duracold to be worn at all times for one to five days for swelling and pain control. Patients should remove brace for excercises.
- Return to office at post-op day one to two for dressing change.
- Patient to use two crutches and weight bearing as tolerated.
- Begin straight leg raises, quad sets, heel slides and prone hang immediately. Use neuromuscular electrical stimulation if needed daily for minimum of one hour if quad shutdown occurs.
- Continue the use of TED hose and cryocuff until one-week follow-up for suture/staple removal.
- Patient may wean out of the knee immobilizer at two weeks.
- Active range of motion and passive range of motion <90 degrees flexion.

Phase II: 3 to 6 Weeks

- Full active and passive range of motion by four to six weeks.
- Full patellar mobility by week six.
- Full weight bearing by week six.
- Patient may use patellar stabilizing brace for comfort, but should be out of the knee immobilizer by week two.
- Emphasis on active range of motion, closed kinetic chain exercises, stationary bike, elliptical trainer, stair master, proprioception and scar massage.

Phase III: 7 to 12 Weeks

- Continue to increase endurance activities, closed kinetic chain exercises, scar massage and begin low level plyometrics (80 foot contacts maximum).
- May begin functional progression to sport at week 12.
- May use patellar stabilizing brace for support.

Helping you achieve the optimal activity level for your lifestyle is my first priority.

- Scott Gudeman, MD

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