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## ACL AVULSION REPAIR PROTOCOL

### General Guidelines

- Focus on protection of the fixation x 6 weeks.
- Wear LROM brace locked at 0° for 6-8 weeks as specified by MD. Keep brace on while sleeping or walking, otherwise it may be removed for exercises and bathing as needed.
- Sleep in the brace locked in extension for 4 weeks.
- Emphasize terminal knee extension with leg elevated. (no pillows underneath the knee)
- Cryotherapy as often as tolerated without direct contact to the skin
- Ambulate TTWB for first 2-3 weeks (unless otherwise instructed by MD)
- Limit ROM to 45 to protect the repair

### 1-14 DAYS POST-OP

- Monitor incision for appropriate healing, but notify physician if increased redness or drainage continues
- Passive knee extension (supine heel prop or prone leg hangs)
- 0-45 ROM only
- Quad sets; NMES when tolerated for Neuromuscular Re-education.
- Straight leg raises if less than 15° of knee extension lag (otherwise needs assistance)
- Progress to 4-way hip exercises when adequate Quad control returns
- Hamstring isometrics with knee extended
- Patella mobilizations
- AROM of the ankle/ankle pumps, DVT prevention
- Gastroc-Soleus stretches
- Hamstring stretches
- Modalities as needed for pain/effusion.

### 2-4 WEEKS POST-OP

- Continue to wear the brace locked in extension for sleeping and ambulation.
- Progress to 25-50% PWB as tolerated with bilateral crutches.
- Progress ROM to 60° knee flexion by week 3 and 90° by week 4.
- Side-lying hip ER strengthening
- Hamstring isometrics with knee flexed to 30-45°

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- Advance 4-way hip exercises as tolerated with weights, starting with weight above the knee working towards below the knee and then towards the ankle.
- Exercise band ankle strengthening.
- Scar massage/mobilization as needed

#### **4-6 WEEKS POST-OP**

- Progress to WBAT with the brace locked in extension.
- Wean from crutches as patient demonstrates good Quad control and knee stability
- Progress ROM to 125° knee flexion by week 6
- Initiate bilateral calf raises
- Stationary cycle as tolerated for ROM and endurance
- Continue Hamstring and Quad strengthening

#### **6-8 WEEKS POST-OP**

- Increase range of motion to within normal limits as tolerated
- Gait training, in-line walking, cones forwards and lateral
- ***Protect patellofemoral joint and adjust exercises accordingly***
- Begin partial squats
- Begin forward step ups: Start at 4 inches>> 6 inches>> 8 inches
- Stationary bicycle for endurance
- Begin active hamstring curls, progress as tolerated
- Began single leg stance exercises for proprioception/balance, static>> dynamic
- Active knee extension in a SAQ ROM only 45° - 0° if no patellofemoral pain
- May begin aquatic therapy once incision is completely healed

#### **8-12 WEEKS POST-OP**

- Advanced CKC exercises to short arc leg press, bilateral>> unilateral, eccentrically focused
- Advanced balance and proprioceptive retraining
- Advanced to 4 way hip machine, Stairmaster, elliptical trainer, hamstring curl machine as tolerated
- Advanced stationary cycling; endurance training>> interval training
- Advance proprioception and balance routine, BOSU, Therapad, Rebounder, SportKat, etc.

### **12-16 WEEKS POST-OP**

- If muscle tone, strength and proprioception are sufficient, start light jogging program (no cutting or pivoting); Treadmill Program
- Advance CKC strengthening, focusing on sport specific routine
- Begin light agility drills, advancing from to leg activities to single leg
- Begin plyometrics (sportsmetrics program), advance from to leg activities to single leg
- Began light sport specific drills

### **4-6 MONTHS POST-OP**

- Continue strengthening, plyometrics, proprioception, agility training, sport running program
- Advance sport specific drills
- Return to normal activity as released by physician.