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# ALL (Anterolateral Ligament) RECONSTRUCTION PROTOCOL

# PRE-OP

- Perform preoperative evaluation with LROM brace fitting.
- Begin preoperative rehabilitation program to regain range of motion, strength, and normalize gait pattern
- Explain pre- and post-surgery goals
- Patient and family education regarding surgical procedures and current pathology

# 1-4 DAYS POST-OP

# Restrictions

- Ambulate TTWB with crutches and LROM brace locked in full extension (unless otherwise instructed by MD) for the first 4 weeks.
- ROM: 0-90 degrees for 4 weeks
- Wear LROM brace locked at 0° while sleeping or walking, otherwise it may be removed for exercises as needed
- Emphasize terminal knee extension, unless posterior-lateral complex injury
- Cryotherapy as often as tolerated without direct contact to the skin
- Elevate lower extremity with knee straight (no pillows underneath the knee)
- Notify physician if fever of 100° or more

# Rehabilitation

- Begin postop program day 1-2
- Passive knee extension but towel roll under heel or prone leg hangs for 5-10 minutes, 3 times a day
- Active or active-assistive heel slides in long sitting position.
- Quad sets on small towel (to better engage the quads)
- Straight leg raises 2-3 times per day with assistance until patient can reduce knee extension lag to less than 15°
- Patella mobilizations as tolerated
- Gravity assisted knee flexion off of the table or heel slides on floor while in a chair (ie. for meals)
- AROM of the ankle/ankle pumps/DVT prevention
- Gastrocnemius and Soleus stretches
- Hamstring stretches in long sitting

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#### 4-14 DAYS POST-OP

#### Restrictions

- Continue TTWB with crutches and LROM brace locked at 0°
- Continue 0-90 degree ROM restriction
- Continue elevation and cryotherapy
- Continue sleeping with the brace locked at 0°
- May shower after all the postoperative dressing is removed (usually day 3) and adequate leg control returns
- Monitor incision for appropriate healing, but notify physician if increased redness or drainage continues

#### Rehabilitation

- Goal: 90° of flexion with at least 0° extension
- Continue all exercises from previous phase
- 4 way SLR when adequate leg control returns
- Side-lying hip ER strengthening
- Modalities as needed for pain/effusion

## 14-28 DAYS POST-OP

## Restrictions

- Continue cryotherapy
- Continue TTWB and 0-90 degree ROM restriction
- May stop sleeping in brace if full extension is achieved

## Rehabilitation

- Advance previous exercises as tolerated with ankle weights starting above the knee working towards below the knee
- Begin active hamstring curls, progress to resistive as tolerated
- Active knee extension in a SAQ ROM only 45° 0° if no patellofemoral pain
- Scar massage/mobilization as needed

#### 4-8 WEEKS POST-OP

#### Restrictions

- Must enforce a normal gait pattern
- Must regain normal range of motion
- No running, jumping, or plyometric activities yet

## Rehabilitation

- Weight bearing as tolerated
- ROM as tolerated
- Protect patellofemoral joint and adjust exercises accordingly
- May begin aquatic therapy once incision is completely healed
- Start with squats, calf raises, and single leg balance exercises
- Advanced CKC exercises to leg press, bilateral>> unilateral, eccentrically focused
- Advanced balance and proprioceptive retraining
- Advanced to 4 way hip machine, Advanced stationary cycling to endurance training>> interval training

## 8-12 WEEKS POST-OP

- Stairmaster, elliptical trainer, hamstring curl machine as tolerated
- Advance CKC strengthening, focusing on sport specific routine
- Advance proprioception and balance routine, BOSU, Therapad, Rebounder, SportKat, etc.
- Measure for functional knee brace

## 12-16 WEEKS POST-OP

- If muscle tone, strength and proprioception are sufficient, start light jogging program (no cutting or pivoting)
- Begin light agility drills, advancing from to leg activities to single leg
- Begin plyometrics, 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 after being released by the physician.