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REHABILITATION GUIDELINES FOR TROCHLEOPLASTY, MPFL RECONSTRUCTION, LATERAL REINACULAR LENGTHENING PROTOCOL

PHASE I (0-2 WEEK POST-OP)

DATES:

Appointments	MD appointment at (7-10 days post-op) Begin physical therapy (3-5 days post-op)
Rehabilitation Goals	<ul style="list-style-type: none"> • Healing phase, protection of repair • ROM (no restriction) • Decreased swelling and pain • Early mobilization of patella (crepitus is normal for up to 8 weeks)
Precautions	<ul style="list-style-type: none"> • WBAT with crutches x 2 weeks with brace on and locked at 0 degrees • Brace locked at 0 degrees extension with ambulation/transfers
Suggested Therapeutic Exercises	<ul style="list-style-type: none"> • Gait training • Quad sets • Open chain hip strength • Bike for ROM • Bilateral balance progressing weight shift progression to SL balance
Cardiovascular Exercises	<ul style="list-style-type: none"> • Bike with no resistance for early ROM
Progression Criteria	<ul style="list-style-type: none"> • Good quad activation • Minimal pain and edema

PHASE II (2-6 WEEKS POST-OP)

DATES:

Appointments	Continue physical therapy 2x week
Rehabilitation Goals	<ul style="list-style-type: none"> • Normalize gait pattern

	<ul style="list-style-type: none"> • Aggressive ROM progression; Full AROM x 6 weeks (at least 90 degrees by 4 weeks otherwise contact MD)
Precautions	<ul style="list-style-type: none"> • Brace unlocked for gait if good quad control • No Closed Kinetic Chain ex's x 6 weeks
Suggested Therapeutic Exercises	<ul style="list-style-type: none"> • Weight bearing progression • Open chain strength with resistance through available ROM • Open chain strength of hips, core, gluts (no CKC x 6 weeks) • Balance progression from bilateral to single leg and static to dynamic
Cardiovascular Exercises	<ul style="list-style-type: none"> • Bike no resistance for ROM
Progression Criteria	<ul style="list-style-type: none"> • AROM at least to 120 flexion • Expect swelling for up to 3 months post-op

PHASE III (6-12 WEEKS POST-OP)

DATES:

Appointments	Continue physical therapy 2x week
Rehabilitation Goals	<ul style="list-style-type: none"> • Strength gains • Initiate CKC exercise: bilateral progressing to single leg
Precautions	<ul style="list-style-type: none"> • No precautions
Suggested Therapeutic Exercises	<ul style="list-style-type: none"> • Eccentric quad strength with LE alignment progressing from bilateral LE to SL exercise. • CKC ex's for hip and core • Start light impact ex's 8-12 weeks pain free.
Cardiovascular Exercises	<ul style="list-style-type: none"> • Bike • Walking (no gait impairments)
Progression Criteria	<ul style="list-style-type: none"> • Good eccentric control maintaining LE alignment • Full AROM

PHASE IV (12-24 WEEKS POST-OP)

DATES:

Appointments	Continue physical therapy 1x week progressing towards independent HEP
Rehabilitation Goals	<ul style="list-style-type: none"> • Multi-directional strength/control

	<ul style="list-style-type: none"> Return to sport progression
Precautions	<ul style="list-style-type: none"> No precautions
Suggested Therapeutic Exercises	<ul style="list-style-type: none"> Initiate multi-plane motions Initiate plyometrics with focus on eccentric quad control Initiate running progression Sports specific drills
Cardiovascular Exercises	<ul style="list-style-type: none"> Bike, walk, run
Progression Criteria	<ul style="list-style-type: none"> Return to sport test passed

References: Connecticut Children's Medical Center (ELITE Sports Medicine)

PT name and date: Julie Perumal 12/31/20

MD name and date: Dr. Gilmer 2/10/21

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