

## Physical Therapy Prescription – ACL Reconstruction with Quadriceps Tendon Autograft Based on MOON Protocol

Name: \_\_\_\_\_ Date of Surgery: \_\_\_\_\_

Procedure: R / L ACL Reconstruction with quadriceps tendon autograft

Frequency: 2-3 times per week for 6 weeks

### PHASE 0: Pre- operative goals (i.e. Pre-hab)

- **Normal Gait**
- **AROM** 0-120 degrees
- **Strength:** 20 SLR with no lag.
- **Minimal Effusion**
- **Patient Education on Post op exercises with a stress on compliance and importance**
- **Education on ambulation with crutches and safe stair use**
- **Wound care instructions**
  - Keep tegederm clean and dry, no showering until 48hrs post-op then remove ACE, No submerging (bath, hot-tub, lake, river, ocean) for 6 weeks post op. Formal instructions will be listed in operative note and packet.
- **Educated in follow-up (also provided in packet) :** 10-14 days post op, 6 weeks, 3 months, 6 months, 9 months, 1 year, 2 years, 5 years.

### PHASE I (Weeks 0 – 4): Period of protection, decrease edema, activate quadriceps

- **Weightbearing:** As tolerated with crutches, with goal of discontinuing crutches by 10 days (may be modified if meniscus repair/transplant or articular cartilage surgery performed at time of ACLR)
  - **Hinged Knee Brace:**
    - Locked in full extension for ambulation and sleeping (weeks 0-4)
      - i. **Only unlock when cleared by practice**
- **Range of Motion:** AAROM → AROM as tolerated
- **Therapeutic Exercises:** Patellar mobs, quad/hamstring sets, heel slides, non-weightbearing Gastroc/Soleus stretching, straight-leg raises with brace in full extension until quad strength prevents extension lag
- **Modalities:** Per therapist, including electrical stimulation, ultrasound, heat (before), ice (after)

### Phase II (Weeks 4 – 6)

- **Weightbearing:** As tolerated, unassisted
- **Hinged Knee Brace:** Discontinue once full extension achieved with no evidence of extension lag
- **Range of Motion:** Maintain full knee extension, work on progressive knee flexion
- **Therapeutic Exercises:** Patellar mobs, quad/hamstring sets, closed chain extension exercises, hamstring curls, toe raises, balance exercises, progress to weightbearing Gastroc/Soleus stretch
  - Begin use of the stationary bicycle
- **Modalities:** Per therapist, including electrical stimulation, ultrasound, heat (before), ice (after)

### Phase III (Weeks 6 – 16)

- **Range of Motion:** Full, painless
- **Therapeutic Exercises:** Advance closed chain strengthening exercises and proprioception activities
  - Begin use of the Stairmaster/Elliptical at **8 weeks**
  - Straight ahead running permitted at **12 weeks**
- **Modalities:** Per therapist, including electrical stimulation, ultrasound, heat (before), ice (after)

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**Phase IV (Weeks 16 – 24):** Gradual return to athletic activity

- **16 weeks:** begin jumping
- **20 weeks:** advance to sprinting, backward running, cutting/pivoting/changing direction
- **24 weeks:** consider **functional sports assessment**

**Phase V (>6 months):** Gradual return to athletic activity

- Gradual return to sports participation after completion of functional sports assessment
- Encourage maintenance program based off functional sports assessment

**Signature:** \_\_\_\_\_

**Date:** \_\_\_\_\_