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REHABILITATION PROTOCOL: MEDIAL COLLATERAL LIGAMENT RECONSTRUCTION OR REPAIR

□ Phase 1 (Weeks 0-2)

- Weight bearing: Toe-touch weight bearing with crutches (modified if concomitant meniscal repair, meniscal transplant or articular cartilage procedure is performed)
- Hinged knee brace
 - Locked in full extension for ambulation and sleeping (weeks 0-2)

□ Phase 2 (Weeks 2-6)

- Weight bearing: Toe-touch weight bearing with crutches
- Hinged knee brace
 - 0-45 degrees for ambulation and sleeping (weeks 0-8)
- Range of motion Active assisted range of motion (AAROM) → Active range of motion (AROM) 0-90
- Therapeutic exercises
 - Calf pumping
 - Passive extension with heel on bolster or prone hangs (Not if PCL reconstruction)
 - Co-contractions quads/hams
 - Straight leg raise on mat in brace
 - \circ Wall sits and leg press 0-45 deg up to ¹/₄ body weight (after 4 weeks)
 - Hamstring curls 0-45 deg, carpet drags (Not if PCL reconstruction)

□ Phase 3 (Weeks 6-12)

- Weight bearing: Full
- Hinged knee brace: Discontinue brace (after 8 weeks) when patient has achieved full extension with no evidence of extension lag
- Range of motion: Full and painless
- Therapeutic exercises (continue above until 8 weeks can add the following)
 - o Step-downs
 - o Treadmill
 - o Stationary bike- progressive resistance and time
 - o Elliptical

□ Phase 4 (Months 3-6)

- Continue with strengthening (quad/hamstring) and flexibility
- Range of motion: Full and painless
- Therapeutic exercises
 - o Slide boards
 - Begin agility drills
 - o Figure 8's
 - Gentle loops
 - o Large zig-zags
 - o Swimming
 - Begin plyometrics at 4 months
 - Contact sports 6 months