

Michael S. Bogard, DO
ORTHOPAEDIC SURGEON
Sports Medicine Specialist

Post-Operative Rehabilitation Guidelines/Rehab Protocol
MPFL Reconstruction for Patellar Instability

0-2 Weeks:

- WBAT in extension, Brace locked at 0 degrees at all times; (off for hygiene and supervised exercise)
- SLR supine with brace locked at 0 degrees, Quad Sets
- Ankle Pumps

2-4 Weeks:

- WBAT in brace locked 0-30
- At 2 weeks, may unlock brace to 30 degrees for ambulating and sleeping
- Increase ROM: 0-60 for exercise
- Goal to mitigate effusion and pain, increase patellar mobility, proprioception training

4-6 Weeks:

- WBAT with brace locked 0-60 for ambulating and sleeping
- ROM: 0-90 (maintain full extension)

6-9 Weeks:

- DC brace and wean from crutches (progress out)
- ROM as tolerated in/out of brace, avoid forceful PROM
- Begin bike for ROM and no resistance
- Soft tissue and scar mobilization techniques as tolerated
- Gentle isometrics and open chain knee extension exercises
- Progress in gluteal and lumbopelvic strength
- Proprioception and single leg balance

9-12 Weeks:

- ROM should be minimum of 0-120, pain free AROM including PF mobility
- Gradually increase strengthening and single leg balance

> 12 Weeks (Return to Sport):

- No running or jumping until 14 weeks
- Hopping ok at full, pain free ROM, no effusion, > 80% isokinetic strength symmetry for hamstring and quadriceps)
- Initiate jogging when hop downs demonstrate appropriate landing mechanics
- Return to sport no sooner than 4 months (surgeon directed)