

## Matthew Gotlin, MD 159 East 74<sup>th</sup> Street New York, NY 10021

## **REHAB PROTOCOL:** MCL and PCL Reconstruction

| Name:                                      | Date:                          |  |
|--|--------------------------------|--|
| Diagnosis:                                 | Date of Surgery:               |  |
| EARLY PHASE (Weeks 0-4)                    |                                |  |
| ☐ Weight Bearing and Range of Motion       |                                |  |
| o 0-6 weeks: toe-touch weight bearing w    |                                |  |
| o ROM: A/AAROM 0-90 degrees as tole        | erated                         |  |
| ☐ Brace Use:                               |                                |  |
| o Locked in full extension at all times of | her than PT                    |  |
| ☐ Therapeutic Elements:                    |                                |  |
| o Modalities as needed                     |                                |  |
| o Patella Mob; SLR's with electric stim.   | ; co-contractions, prone hangs |  |
| o Estim; Co-contractions                   |                                |  |
| o No abduction of hip or leg at any time   | ne —                           |  |
| o No prone hangs                           |                                |  |
| □ <b>Goals:</b> o a/aa/ROM: 0-90 degrees   |                                |  |
| o Control pain/swelling                    |                                |  |
| o Quad control                             |                                |  |
| o Quad control                             |                                |  |
| RECOVERY PHASE (Weeks 5-8)                 |                                |  |
| ☐ Weight Bearing and Range of Motion:      |                                |  |
| o Discontinue crutches at week 6           |                                |  |
| ☐ Brace Use:                               |                                |  |
| o At all times, open to AROM; discontin    | nue at week 8                  |  |
| ☐ Therapeutic Elements:                    |                                |  |
| o Continue above                           |                                |  |
| o Gentle hip abduction with no resistance  | e below knee                   |  |
| o Wall-sits 0-45                           |                                |  |
| o Mini-squats with support 0-45            |                                |  |
| o Pool therapy                             |                                |  |
| o Treadmill walking by 8 weeks             |                                |  |
| ☐ Goals:                                   |                                |  |

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| o a/aa/ROM: 0-110 degrees by 6 weeks and free by 8 we      | eeks |
|--|------|
| o SLR x 30   |      |
| o No effusion  |      |
|  |      |
| STRENGTHEN PHASE (Weeks 8-12)                              |      |
| ☐ Weight Bearing and Range of Motion:                      |      |
| o Full   |      |
| ☐ Therapeutic Elements:                                    |      |
| o Continue above with increased resistance                 |      |
| o Step-downs   |      |
| o Treadmill  |      |
| o Stretching   |      |
| o Begin prone hangs and HSL                                |      |
| □ Goals:   |      |
| o Walk 1-2 miles at 15 min/mile pace                       |      |
| 1  |      |
| REINTEGRATION PHASE (Months 3-5)                           |      |
| ☐ Weight Bearing and Range of Motion:                      |      |
| o Full   |      |
| ☐ Brace Use:   |      |
| o None   |      |
| o If return to sport, fitting for custom brace by 5 months |      |
| o Can start jogging/running at 6 months                    |      |
| ☐ Therapeutic Elements:                                    |      |
| o Slide boards   |      |
| o Begin agility drills                                     |      |
| o Figure 8's   |      |
| o Gentle loops   |      |
| o Large zig-zags   |      |
| o Swimming   |      |
| o Begin plyometrics at 4 months                            |      |
| □ Goals:   |      |
| o Treadmill (walk 1-2 miles at 10- 12 min/mile pace)       |      |
| o Return to competitive activities                         |      |



| <b>Comments:</b> |                |           |       |
|------------------|----------------|-----------|-------|
| Frequency:       | times per week | Duration: | weeks |
| Signature:       |                | Date:     |       |

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