Casp Patellaor Quad Repair Post-Operative Rehabilitation Protocol

Phase I: 0 – 3 weeks

•Hinged knee brace locked in extension at all times (may remove for hygiene purposes)
•Protected weight bearing with crutches/walker for first 2 weeks, then WBAT in brace
•Patella mobilization exercises
•Quadriceps isometric sets in full extension
•Prone ROM 0-30 wks 2-3
•Hip abduction straight leg raises
•Ankle ROM

Phase II: Weeks 3-6

•Continue hinged brace locked in extension for ambulation, may remove/unlock for therapy
•Begin passive knee extension; active knee flexion to 30° @ week 2, to 60° @ week 4, then to 90° @ week 6 (prone position)
•Continue previous exercises
•Patella mobilization
•Isometric straight leg raises with brace locked in extension; supine/sitting
•Isometric hamstring strengthening

Phase III: Weeks 7 – 12

•May start to unlock brace with ambulation; begin with flexion locked @ 45°, then advance 10°/week as quadriceps control increases
•Continue previous exercises
•Begin AAROM knee extension and advance to AROM knee extension
•Advance active knee flexion to 120°, and then advance as tolerated
•Stationary bicycle, start with no resistance and low knee flexion angle, and then may slowly advance
•At week 10, may begin treadmill walking program

Phase IV: Weeks 12 – 16

•Ambulation with brace fully unlocked, then wean out of brace as tolerated
•Continue previous exercises
•Full active knee ROM
•Begin progressive resistive exercises, avoid open chain and terminal resisted knee extension
•Begin elliptical trainer
•May start light jogging
•Proprioception and balancing exercises

Phase V: Months 5 – 6

•Maintain full knee range of motion
•Continue previous exercises
•Advance cycling, jogging
•Progressive strengthening, plyometric and agility training
•Add sport specific training

Phase VI: Months 6+

•Resume normal sporting/jumping/cutting activities when leg strength >80% contralateral leg
•Maintain strength, agility and proprioception