

ACL Reconstruction

Physical Therapy Protocol

Keys to a Successful Outcome

- Same protocol pertains to all graft choices
- If meniscus repair or cartilage procedure is performed, protocol will be modified
- Crutches/walker should be used after surgery until patient can walk safely

Phase	Brace	ROM Goals	WB	Exercises
Weeks 0-4	Weeks 0-1: Locked in full ext Weeks 1-4: unlocked for ambulation	FAROM	WBAT in Brace	Heel slides, quad/ham sets, patellar mobs, gastroc/soleus stretch; SLR w/ brace in full ext until quad strength prevents ext lag; side-lying hip/core
Weeks 4-12	None	FAROM	WBAT	Begin toe raises; progress quad/ham exs; stationary bike; progress hip/core training
Weeks 12-16	None	FAROM	WBAT	Advance CC strengthening; begin Stairmaster/elliptical at 8 wks; treadmill or track jogging at 12-16 wks at the earliest
Weeks 16-24	None	FAROM	WBAT	16 wks: Begin jumping 20 wks: Advance running, backward running, cutting/pivoting/changing direction, initiate plyometric program and sport-specific drills 22 wks: Advance as tolerated
Months 6+	None	FAROM	WBAT	Gradual return to sport-specific maneuvers, consider Functional Sports Assessment
Months 9-12	None	FAROM	WBAT	Unrestricted return to pivoting, contact, and cutting sports

General Time Frames for ADLs

- Driving: 2-8 wks
- Return to work: 2-4 wks (sedentary), 6-8+ wks (prolonged standing)
- Straight-line treadmill or track running: 3-4 mo
- Agility and change-of-direction drills: 5-7 mo
- Return to sports: 9-12 mo