

## ACL Reconstruction with Bone-Patellar Tendon-Bone (BTB) Allograft and Meniscal Root Repair Rehabilitation Protocol

|                                   | Weight-bearing  | Brace   | Range of Motion                                   | Exercises  |
|-----------------------------------|---|---|---|--|
| Phase 1<br>0-4 weeks              | Heel touch with<br>crutches <sup>a</sup>  | <b>0-4 week</b> : Locked in full extension for ambulation and sleeping.               | Gentle Passive<br>0-90° at one-week<br>postop     | Calf pumps, patellar mobilization, quadriceps tightening sets and SLR <b>in brace</b> . No weight-bearing motion.                                      |
|                                   |   | Off for exercises and hygiene only  |   |  |
| Phase 2<br>2-12 weeks             | 4-6 weeks:<br>50% weight<br>bearing with<br>brace unlocked<br>0-90°                           | 4-6 weeks:<br>Unlocked 0-90°  | <b>4-6 weeks</b> : 0-90                           | Add side-lying hip and core, advance quad set and stretching <sup>a</sup>  |
|                                   |   | Off at night Discontinue brace at 6 weeks once normal gait achieved                   | <b>7-8 weeks:</b> progress beyond 90 to gain full | In brace: Addition of heel raises, total gym (closed chain), gait normalization, eccentric quads, eccentric hamstrings.                                |
|                                   | 6-8 weeks:<br>Wean off<br>crutches and<br>progress to full<br>with normalized<br>gait pattern | <b>7-8 weeks</b> : Unlocked 0-90 for ambulation, can remove for                       | and pain-free<br>ROM                              | Advance core work with hip, gluteal and core strengthening  No weight-bearing with flexion >90°  |
|                                   |   | sleeping, Discontinue at 8 weeks if quadriceps control is adequate (no extension lag) |   | Begin toe raises, closed chain quads, balance exercises, hamstring curls, stationary bike, step-ups, front and side planks, hip/glute/core             |
|                                   |   |   |   | Begin Stationary Bike at 8-10 weeks  |
| Phase 3<br>12-16 weeks            | Full with<br>normalized gait<br>pattern   | None  | Full  | Advance closed chain strengthening<br>Progress proprioception activities   |
|                                   |   |   |   | Elliptical at 12 weeks (low flexion angles)  |
|                                   |   |   |   | Running straight at 14-16 weeks when 8" step down is satisfactory  |
| Phase 4<br>16 weeks –<br>6 months | Full  | None  | Full  | 16 weeks: Begin jumping  |
|                                   |   |   |   | 20 weeks: Advance running to sprinting, backward running, cutting, pivoting, changing direction, initiate plyometric program and sport-specific drills |
|                                   |   |   |   | 22 weeks: Advance as tolerated   |
|                                   |   |   |   | FSA completed at 22 weeks <sup>b</sup>   |
| Phase 5<br>6-12 months            | Full  | None  | Full  | Gradual return to sports participation after completion of functional sports assessment (FSA)  |
|                                   |   |   |   | Maintenance program based on FSA   |

## SLR - Straight-leg raise

<sup>&</sup>lt;sup>a</sup>Modified with concomitantly performed meniscus repair/transplantation or articular cartilage procedure

<sup>&</sup>lt;sup>b</sup>Completion of FSA (Functional Sports Assessment) is not mandatory, but is recommended at approximately 22 wks postop for competitive athletes returning to play after rehabilitation