

ACL Reconstruction with Quadriceps Tendon Autograft Rehabilitation Protocol






	Weight-bearing	Brace	Range of Motion	Exercises
Phase 1 0-4 weeks	As tolerated with crutches ^a	0-1 week: Locked in full extension for ambulation and sleeping 1-4 weeks: Unlocked for ambulation, remove for sleeping ^b	As tolerated	Heel slides, quadriceps/hamstring sets, patellar mobilization, calf (gastroc/soleus) stretch SLR w/ brace in full extension until quadriceps strength prevents extension lag
Phase 2 4-12 weeks	Full, progressing to normal gait pattern	Discontinue at day 28 if patient has no extension lag	Main full extension and progressive flexion	Progress Phase I Begin toe raises, closed chain quads, balance exercises, hamstring curls, stationary bike, step-ups, front and side planks, hip/glute/core, pool
Phase 3 12-16 weeks	Full, without use of crutches and with a normalized gait pattern	None	Gain full and pain-free	Advance closed chain strengthening, progress proprioception activities Begin stairmaster, elliptical and running straight ahead
Phase 4 16 weeks – 6 months	Full	None	Full and pain-free	16 wks: Begin jumping 20 wks: Advance running to sprinting, backward running, cutting/pivoting/changing direction, initiate plyometric program and sport-specific drills 22 wks: Advance as tolerated FSA completed at 22 wks ^c
Phase 5 6-12 months	Full	None	Full and pain-free	Gradual return to sports participation after completion of functional sports assessment (FSA) Maintenance program based on FSA

SLR – Straight-leg raise

^aModified with concomitantly performed meniscus repair/transplantation or articular cartilage procedure

^bBrace may be removed for sleeping after first post-operative visit (day 7-10)

^cCompletion of FSA (Functional Sports Assessment) is not mandatory, but is recommended at approximately 22 wks post-op for competitive athletes returning to play after rehabilitation.

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