



EXTENSORY MECHANISM RECONSTRUCTION SURGERY (PATELLAR TENDON / QUADRICEPS TENDON) Physical Therapy Protocol

Patient Name: _____ Date of Surgery: _____

Procedure: Right / Left Extensory Mechanism Reconstruction Surgery (Patellar Tendon/Quadriceps Tendon)

_____ Evaluate and Treat - no open chain or isokinetic exercises

_____ Provide patient with home exercise program

Frequency: _____ x/week x _____ weeks

_____ **Phase I (0-6 weeks):** *Period of protection. A home-program alone may suffice for this period of time.*

- WBAT with crutches, brace locked in extension during all weight-bearing activity and during sleep.
- ROM:
 - Knee: None - remain in the brace.
 - Ankle/Hip: ROM exercises 2-3 x per day.
- Strict elevation while seated.

_____ **Phase II (6-12 weeks):** *Period of protection. A home-program alone may suffice for this period of time.*

- WBAT with crutches, brace locked in extension during all weight-bearing activity and during sleep.
- ROM:
 - Knee: patients to perform active prone knee flexion as tolerated 2-3 x per day. No active extension or forced passive flexion. All ROM should be non-weightbearing and with the brace on, following the progression below:
 - 6-7 weeks: Brace unlocked from 0-30 degrees.
 - 7-8 weeks: Brace unlocked from 0-60 degrees.
 - 8-9 weeks: Brace unlocked from 0-90 degrees.
 - Ankle/Hip: ROM exercises 2-3 x per day.
 - Strict elevation while seated.
 - No quadriceps strengthening until at least 12 weeks post-op

_____ **Phase III (9 weeks - 5 months):** *Begin regular, supervised strengthening and wean from the brace.*

- Wean from crutches, then D/C brace once ambulating with a normal gait and can perform SLR without an extension lag.
- ROM : brace fully unlocked; advance active and active-assisted ROM as tolerated; gentle passive stretching at end-range. Goal: 0-120 or greater by 14 weeks.
- **Strengthening:**
 - Begin isometric quad sets, SLRs.
 - Progress to closed chain strengthening (no open-chain) once out of the brace.

_____ **Phase IV (5-9 months):** *Begin more sport-focused conditioning.*

- Advance strengthening as tolerated, continue closed-chain exercises. Increase resistance on equipment.
- At 5 months, start jogging and progress to agility training and/or other sport-specific rehab as tolerated.
- Begin to wean patient from formal supervised therapy encouraging independence with home exercise program by 6 months.

_____ **Other:**

_____ Modalities _____ Electrical Stimulation _____ Ultrasound
_____ Heat before/after _____ Ice before/after exercise

By signing this referral, I certify that I have examined this patient and physical therapy is medically necessary.
This patient _____ would _____ would not benefit from social services.

Physician Name: _____ Date: _____