# Postoperative Rehabilitation Protocol for Quadriceps or Patellar Tendon Repair

Physical therapy should be started within a few days after surgery

## Phase 1: Postoperative weeks 0-6

#### GOALS

- Protect repair
- Minimize pain/swelling

#### **BRACE/CRUTCH USE**

- Brace locked in extension at all times except with therapy
- WBAT with crutches with brace locked at o degrees (full extension)

#### RANGE OF MOTION

- Avoid active knee ROM
- Achieve full knee extension
- Passive ROM
  - 0-30 degrees (weeks 0-2)
  - 0-60 degrees (weeks 2-4)
  - 0-90 degrees (weeks 4-6)
- Patella mobilization

#### STRENGTHENING

- Ankle pumps
- SLR supine with brace locked at full extension
- Quad sets

#### **MODALITIES PRN**

### Phase 2: Postoperative weeks 6-12

#### GOALS

• Work on regaining a normal gait

- Improve active ROM
- Incorporate more muscle strengthening

#### BRACE/CRUTCH USE

- Wean off crutches as tolerated
- May ambulate using one crutch on the opposite side of operative leg
- Unlock brace for ambulating. Wean from brace as tolerated

#### RANGE OF MOTION

- Stationary bike
- Avoid deep flexion to include knee bends, lunges, and squats
- Progress to full ROM

#### STRENGTHENING

- Wall slides
- Leg press with 2 legs
- Hamstring curls
- Single leg balance starting on floor
- Chair / wall squats
- At 10-12 weeks, can use all cardio equipment as tolerated (no jogging)
- Unilateral step ups and downs progress height as tolerated with emphasis on controlled descent
- Variations of lunges to include walks and squats

### Phase 3: Postoperative weeks 12-16

#### GOALS

- Full ROM
- Full weight bearing
- Progressive stretching and strengthening of muscles

If you have any problems or questions, please call your doctor's office (8am-5pm). Answering service for after hours. 667 KINGSBOROUGH SQU, STE 300 CHESAPEAKE, VA 23320 P 757.422.8476 | F 757.425.8476 ORTHOVIRGINIA.COM

#### RANGE OF MOTION

• Full ROM

#### STRENGTHENING

- Continue as above
- Initiate jogging on treadmill

- Lateral movements
- Agility exercises
- Full strength (at least 85-95% of unaffected leg) use isokinetic test if needed



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