Isolated MCL Repair / Reconstruction Postoperative Rehabilitation Protocol Dr. Jeffrey Witty, M.D.

Notes:

- Please review any additional notes for adjustments to protocol depending on concurrent pathology (ex. meniscus repair)
- AVOID valgus force to knee during rehab exercise
- No aggressive PROM to avoid stretching graft tissue
- PT to educate and observe patient to avoid pivoting over the knee
- PT to educate and observe patient to avoid tibial external and internal rotation of the knee
- PT to observe and adjust rehab based on patient response regarding pain and effusions.

Modalities:

- Ice, compression, thigh high compression sleeve, and other swelling reduction ok to start immediately.
- Ice pack/cryo 30 min on and 30 min off
- Thigh high compression sleeve at least 6 weeks postop

	Weightbearing	Brace	ROM	Exercise
Phase I Week 0 - 2	NWB	Hinged brace locked in full extension for sleeping, ambulation	None	Knee extension exercises heel prop - towel stretch for extension Quad sets SLR in brace Standing hip extension and abduction (while in brace) Patella mobs avoiding skin
Phase II Week 2 - 3	NWB	Locked in full extension at all times for sleeping, ambulation. Unlock/open for ROM exercise.	0 - 60	As above

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Phase III	NWB	Acabaya	0 - 90	As above
Week 4 - 6	D. Maria Att.	As above	D. DOWN I	
Phase IV Start Week 6- 12	Progress WBAT	Wean out of brace once gait normalizes Fit for MCL brace	Progress ROM tolerated with precautions noted above in the notes. Only 0 – 70 during WB exercise to avoid stress on graft during femoral roll back.	As above Start WB closed chain exercises 0 – 70. Mini squats with two legs. Stationary bike
Phase V Week 12 - 16	WBAT	Fit for MCL brace	As tolerated	As above. Progress beyond 0 - 70 for WB exercise Progress PRE and proprioception

Phase VI	WBAT	o .	As tolerated	As above
Week 16 -		activity		Progress to
24				jogging as tolerated

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Phase VII	WBAT	MCL as needed	As tolerated	Sport specific
Return to				drills once passes
Sport				functional testing

Protocol adapted from: LaPrade et al Clin Orthop Relat Res 2012 Marx et al Clin Orthop Relat Res 2012