

**MPFL Reconstruction
Postoperative Rehabilitation Protocol
Dr. Jeffrey Witty, M.D.**

	Weightbearing	Brace	ROM	Exercise
Phase I Week 0 - 2	WBAT with brace locked in full extension	On at all times. Locked in full extension including sleeping and ambulation.	AROM/AAROM PROM 0 - 90	Week 0 - 2: Quad and hamstring sets/isometrics Ankle ROM Calf pumps SLR in brace locked in full extension
Phase II Week 2 - 6	WBAT with brace. Can progressively unlock based on quad tone	As phase I Can d/c at night if able to maintain full extension. If not, continue brace at night. Discontinue at 6 weeks if no extensor lag Can transition to patella stability brace if desired	Progress ROM as tolerated	As phase I Progress to normal gait pattern. Add easy and light closed chain quad. Add patella mobs Add 4 way hip, glutes, hamstring curls, balance exercises.
Phase III Week 6 - 12	WBAT	None Patella stability brace if desired	As tolerated	As Phase II Progress closed chain quad Progress hamstrings, balance, core/pelvic and stability. Add stationary bike
Phase IV Week 12- 16	WBAT	None Patella stability brace if desired	As tolerated	Continue above phases Progress flexibility, strengthening as tolerated (will start plyometrics week 16) Can start in-line jogging under PT supervision.

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Phase V 4 - 6 months	WBAT	None	As Tolerated	Continue the above phases Add plyometrics Add sport specific drills Functional assessments if ready to discuss RTP
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Starting Immediately:

- compressive soft dressing
- hinged knee brace or immobilizer locked in full extension
- CPM can be used per patient preference but not required
- Commercial cryo/compression devices are suggested to facilitate swelling reduction, pain control, and decreased pain medication requirements
- E – stim to quad

Adapted from:

Pagenstert et al Arthroscopy 2012
 O'Neill et al JBJS 1997
 Reagan Clin Sport Med 2014
 Magnussen et al Arthroscopy 2014
 Duchman et al Clin Sport Med 2014
 Tjoumakaris et al AJSM 2010
 Noyes' Knee Disorders Text