

## JONAS R. RUDZKI, MD

SPORTS MEDICINE ORTHOPAEDIC SURGEON,
SPECIALIZING IN SHOULDER & KNEE SURGERY

WWW.JRRUDZKIMD.COM

Post-Operative: Patellar Instability Rehab Protocol – MPFL Reconstruction / Repair

K STREET/DOWNTOWN

Phone: 202-833-1147

Fax: 202-296-2515

2021 K St NW, Suite 516

Washington, DC 20006

**CHEVY CHASE** 

Phone: 301-657-1996

Fax: 301-951-6160

5454 Wisconsin Ave

Suite 1000

Chevy Chase, MD 20815

SIBLEY

Phone: 202-787-5601

Fax: 202-787-5606

5215 Loughboro Rd NW

Suite 200

Washington, DC 20016

www.wosm.com

WOSIVI WASHINGTON ORTHOPAEDICS & SPORTS MEDICINE

Patient Name: Date:

Diagnosis: Patellar Instability Rehab Protocol – MPFL Reconstruction / Repair

PROXIMAL DISTAL REALIGNMENT/VMO ADVANCEMENT:

PHASE I: (4 weeks)

RANGE OF MOTION: (passive)

0 to 70° by day 10-14 0-90° by day 15-21

**RANGE OF MOTION:** (active/AAROM)

As tolerated with above parameters. Active extension okay if no Tubercle Osteotomy.

No resisted leg extensions

WEIGHT BEARING: As tolerated at end of Week 1

**MODALITIES:** 

Cryotherapy Light EMS at 3-4 weeks if necessary

**EXERCISES:** 

**PROM** 

Quad, Hamstring, Gluteal Isometrics, Gentle Core

Emphasize Quad recruitment & gentle strengthening with Quad Sets, SLRs

PHASE II: (6-8 weeks)

ROM should be at least 130°

**WEIGHT BEARING:** 

Progress off of crutches as tolerated at 4-6 weeks with normal gait pattern

Emphasis on normal gait pattern

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## **EXERCISES:**

Supine SLR at 5-6 weeks

Isometric Multi Angled Quad Sets

Closed chain exercises in accordance with weightbearing status

**Balance Coordination activities** 

**STRENGTH TESTING:** 

Isometric strength testing at 60° at 14 weeks

PHASE III: >3 months

**ROM full** 

WEIGHTBEARING full

**MODALITIES** cryotherapy

STRENGTH TESTING continue testing until patient reaches torque/body weight goals

**EXERCISES** 

Begin plyometrics & Light jogging at 4 months

Continue closed chain balance activities

Sport specific functional progression

RETURN TO SPORTS @ ~5 MONTHS

Completion of functional progression

Torque/body weight ratios per goals set

Phy	sician:	Signature:

