

CORY D. SMITH, MD Orthopaedic Surgery and Sports Medicine

Shoulder Reconstruction & Arthroplasty Hip, Shoulder, Knee, & Elbow Arthroscopy

POST-OPERATIVE REHABILITATION: PLC RECONSTRUCTION

Therapy Plan: Twice per week for 0-3 months, once per week for 3-6 months

ROM Progression

Passive knee motion for 0-2 weeks after surgery restricted to pain-free range from 0-90 degrees. Progress ROM as tolerated after 2 weeks with the goal of symmetric full motion at 6-8 weeks.

Weight Bearing Progression

Initial weight bearing 0-2 weeks after surgery should be 25% body weight with the foot flat on the ground.

- Progress weight bearing over weeks 2-6 with the goal of removing crutches at 6 weeks
- Do NOT progress to one crutch gait must be pain free and non-compensatory to remove both crutches
- Brace should remain in place until completely off crutches, then may wean out over following 1-2 weeks

Initial Post-Operative Physical Therapy Visit

- Correctly perform 25% maximum body weight foot flat weight bearing with crutches
- Instruct on leg bridge for extension, heel slides for flexion, ankle pumps
- Isometric exercises for core, glutes, quadriceps, hamstrings

Phase 1 Physical Therapy (0-6 weeks): protect the joint, progress ambulation

- NO open-chain exercises
- Manual therapy 20+ minutes per session, stationary bike 20-60 minutes/day (NO resistance)
- Soft tissue mobilization, patellar mobilization, isometric exercises, core strengthening
- Brace locked in extension for ambulation until full control, then may unlock for full motion
- Tactile and verbal cueing to enable non-compensatory gait patterning

Phase 2 Physical Therapy (6-12 weeks): progressive strengthening

- Initiate closed-chain strengthening and planks advancing as tolerated
- Proprioceptive training
- Standing weight shifts, backward/lateral walking without resistance (NO pivoting)
- Soft tissue mobilization, patellar mobilization, isometric exercises, core strengthening
- Initiate step-up and step-down programs

Phase 3 Physical Therapy (12-24 weeks): return to pre-injury level

- Focus on functional exercises in all planes, advance only when fully controlled
- Advance closed-chain and core strengthening
- Proprioceptive training
- Elliptical and pool running may start at 14 weeks, straight treadmill running may start at 16 weeks
- Agility drills may start at 18 weeks, sport-specific drills and plyometrics may start at 20 weeks

Phase 4 Physical Therapy (24+ weeks): return to sport

- Full return may take a full 6-12 months or more and requires functional assessment prior to return
- Advance closed-chain and core strengthening as needed
- Continue proprioceptive training, agility drills, and sport-specific drills as needed