Preoperative Knee Protocol

Weight-Bearing and Immobilization	 No immobilization necessary unless MCL tear if MCL tear then wear hinged knee brace unlocked from from 0-90° for two weeks post-injury; then unlock brace for full ROM for 4 weeks; may discontinue brace after 6 weeks post-injury WBAT
	Wean crutches or other assist devices (if being used)Normalization of gait pattern
Aerobic	 Non-impact exercises as tolerated (stationary bike, elliptical machine, etc.) once full ROM, minimal knee swelling, and normal gait Avoid any activities requiring jumping, impacting, cutting, twisting, pivoting, or lateral movement
Range of Motion (ROM) and Strengthening	 Focus on achieving full and symmetric knee ROM, particularly resolution of any flexion contracture Introduce ROM exercises that may be part of post-operative rehabilitation (particularly for restoring post-operative full and symmetric knee extension) Low-impact strength and conditioning program once full ROM, minimal knee swelling, and normal gait Strengthening to focus on quadriceps, core, hip abductors, and hip external rotators
Other	 Modalities as needed to reduce swelling and for muscle re-education Home Exercise Program (HEP) per discretion of Physical Therapist Discuss post-operative rehabilitation program
Goals	 Decrease and control pain Decrease and control swelling Restore full and symmetric knee ROM Restore normal gait pattern Initiate low-impact strength and conditioning program