#### Taylor R. Dunphy, MD [Newport Orthopedic Institute](https://www.newportortho.com/)

Orthopaedic Surgery and Sports Medicine

PATIENT NAME

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**DIAGNOSIS ( LEFT / RIGHT ) ACL RECON WITH BTB/QUAD/ALLOGRAFT AND MEDIAL/LATERAL MENISCAL REPAIR­­­­­­­­**

**DATE OF SURGERY\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**PHYSICAL THERAPY PRESCRIPTION**

**0-2 Weeks—NWB, crutches, Passive ROM 0-60 only, Straight leg raise, isometric quads, icing and edema control, prone heel hangs, ankle pumps**

**2 Weeks s/p Reconstruction**

* TTWB with brace locked in extension
* Progress AAROM and AROM 0 –90. Limit flexion to 90 for 4 weeks to protect meniscus. Passive terminal extension (40° - 0°)
* Quadriceps re-education E-stim / Biofeedback
* Isometrics at 90° / Straight Leg Raises with 1lb weight
* Patellar mobilization (gentle)
* Short crank bicycle ergometry
* Cryotherapy
* Goals - 90° flexion by end week 4
  + 110° flexion by end week 6, full weight bearing

**6 Weeks s/p Reconstruction—DC brace, allow full weight bearing.**

* Open Brace then discontinue if quad control is good.
* Terminal ROM flex and extension. No limitations
* Begin squat/step program
* Quadriceps strengthening
* Continue closed chain Quadriceps strengthening in full arc (leg press, wall slides)
* Begin retro program

**12 Weeks s/p Reconstruction**

* Quadriceps Isotonics - full arc for closed chain.
* Begin functional exercise program
* Isokinetic Quadriceps with distal pad
* Begin running program at 18 weeks

**24 Weeks s/p Reconstruction**

* Full arc progressive resistance exercises - emphasize Quads
* Agility drills
* Advanced functional exercises
* Progress running program – cutting, consider fitting for functional brace

**Physician’s Signature:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Taylor R. Dunphy, MD, Orthopaedic Surgeon, Newport Orthopedic Institute**