Physical Therapy Protocol - ACL Reconstruction (Allograft or Hamstring)

Note: if patient had Meniscus Repair in conjunction with ACL Reconstruction, use Meniscus Repair Protocol

	Weight Bearing	Brace Use	Therapy*
Phase I 0-4 weeks	and ROM Weight bearing as tolerated (WBAT) with crutches. ROM: as tolerated Full symmetric extension by 2 weeks.	0-1 week: locked in full extension for sleep and ambulation. 1-4 weeks: unlocked for ambulation, locked for sleep.	 Heel slides, quad and hamstring sets, patella mobilizations, gastrocnemius/soleus stretch (NWB). Prone hangs. SLR with brace locked in full extension until patient has no extension lag with SLR, then unlock brace. If hamstring: no hamstring
	Goal: Flexion to 120 degrees by 4-6 weeks.		stretching or exercises until 4 weeks post-operative.
Phase II 4-6 weeks	Discontinue crutches. Maintain full extension. Advance to full flexion as tolerated.	Discontinue brace when patient has full active extension and no extension lag.	 Stationary bike. Weight bearing gastrocnemius/soleus stretches. Begin toe raises. Closed chain extension, balancing exercises, hamstring curls.
Phase III 6 – 16 weeks	Full ROM	None	 Advance closed chain strengthening. Proprioceptive training. 3 months: begin straight ahead running.
Phase IV 16 - 24 weeks	Full ROM	Possible custom fit ACL brace for playing.	 4 months: may use elliptical. Increase flexibility. May begin jumping. 5 months: sprinting; forward-backwards running, sports specific training, cutting. Sports metrics (plyometrics) advanced jumping and landing program. Advanced strengthening program. 6 months: functional sports assessment. 6-8 months: return to sport if approved by surgeon.

^{*}Modalities per therapist including electrical stimulation, ultrasound, heat (before), ice (after).