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Rehab Protocol



**ACL Reconstruction *without meniscus repair* (i.e.- isolated ACLR +/- partial meniscectomy)**

***\*\* Please follow MOON protocol for specifics ... this just clarifies weight-bearing, ROM and brace use***

Phase 1: Immediate post-op Weeks 1-2	<ul style="list-style-type: none"><li>• WBAT locked straight – crutches for support<ul style="list-style-type: none"><li>- Discontinue crutches as comfort &amp; gait safety allows</li><li>- This restriction is for home guidance, but encourage out of brace ambulation in PT clinic</li></ul></li><li>• Sleep with brace locked straight first week, then ok to progress out of for patient comfort</li><li>• Encourage full NWB ROM, active &amp; passive</li><li>• Bike for ROM, not for cardio</li><li>• Encourage patellar glides, SLR / quad sets, hip add / abd</li><li>• NMES unit for quad recruitment</li><li>• **OK to start WB flexion 0-30 as quad control improves</li></ul>
Phase 2 Weeks 3-4	<ul style="list-style-type: none"><li>• WBAT with brace 0-30 at a minimum</li><li>• Progressively unlock 30 degrees per week</li><li>• Brace: Goal is to d/c brace by 4 weeks post-op</li><li>• Bike for ROM and early cardio</li><li>• NMES unit for quad recruitment</li><li>• Scar management with Vitamin E oil</li></ul>
Phase 3 and beyond	<ul style="list-style-type: none"><li>• Progress with MOON protocol or equivalent (per PT)</li></ul>

**General ACL Graft Principles:**

**-ACLR with allograft:** progress with WB flexion early as quad control allows; start hamstring (HS) activities (stretches, ROM, strengthening) as comfort allows

**-ACLR with quad autograft:** no restrictions in quad ROM and strengthening (pain and control typically improves around 3-5 week mark); start HS activities as comfort allows

**-ACLR with hamstring autograft:** HS stretching ok at 3-4 weeks and HS strengthening at 6-8 weeks

**-ACLR with patellar tendon autograft:** same as quad autograft in general; anterior knee pain / quad weakness persists longer than allograft / quad auto / HS auto