

PHYSICAL THERAPY PRESCRIPTION

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DIAGNOSIS (LEFT / RIGHT) ACL RECONSTRUCTION WITH: BTB/ALLOGRAFT/HAMSTRING GRAFT
DATE OF SURGERY _____

PHYSICAL THERAPY PRESCRIPTION

0-2 Weeks—TDWB, crutches, Passive ROM unlimited, Straight leg raises, prone hangs, isometric quads, icing and edema control, ankle pumps

2 Weeks s/p Reconstruction

- ___ Advance to full WB with brace locked in extension
- ___ Progress AAROM and AROM 0 –90 by end of 1st week, 110 by end of second week; emphasize extension
- ___ Quadriceps re-education E-stim / Biofeedback
- ___ Isometrics at 90° / Straight Leg Raises with 1lb weight
- ___ Patellar mobilization (gentle)
- ___ Short crank bicycle ergometry
- ___ Cryotherapy
- ___ Goals - out of brace with good quad control 3-4 weeks

6 Weeks s/p Reconstruction

- ___ 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

Treatment: _____ **times per week** **Duration:** _____ **weeks**

Physician's Signature: _____

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