



R PEPPER MURRAY, MD

JOHN C EDWARDS, MD

ERIC C JOHNSTON, MD

STEVEN B HUIISH, MD

JOSHUA M HICKMAN, MD

JARED J TYSON, MD

CLINT J WOOTEN, MD

CHRISTOPHER S ENGLISH, MD

MICHELLE PEPPER, MD

TRAVIS M HENDRY, MD

BRIAN D POWELL, MD

PAUL J JOHNSON, MD

Posterolateral Corner Reconstruction:

Phase 1–Maximum Protection (Weeks 0 to 6):

Weeks 0-2:

- Brace locked at 0° at all times for six weeks
- Ice and modalities to reduce pain and inflammation
- Use crutches non-weight bearing for 6 weeks
- Initial patella mobilizations
- ROM 30-90°WITH VALGUS STRESS APPLIED
 - Quadriceps setting
 - Multi-plane straight leg raising in brace

Weeks 2-6:

- Continue with program outlined above
- Full knee extension (NO HYPEREXTENSION); limit flexion to 90° until week 4)
- Gradually progress flexion ROM to full after 4 weeks

Phase 2: Progressive Stretching and Early Strengthening (Weeks 6-12):

- Continue with modalities to control inflammation
- May begin to progressively increasing weight bearing full knee extension (no hyperextension)
- Knee flexion progress to full as tolerated
- Bilateral closed kinetic chain squatting
- Multi-plane open and closed kinetic chain hip strengthening
- Step-up progression
- Gym strengthening (leg press, hamstring curls, calf raises) as tolerated
- Stationary biking, walking, and elliptical

Phase 3: Advanced Strengthening and Proprioception Phase (Weeks 12-20)

- Full knee flexion and extension with terminal stretch
- Advance cardiovascular program; no running
- Increase intensity of closed kinetic chain exercises
- Advance gym strengthening progressing from bilateral to unilateral as tolerated Leg press, squats, partial lunges, hamstring curls, abd/adduction, calf raises
- Increase intensity of bike and walking program and elliptical trainer
- May begin a pool running program at 16 weeks

Phase 4: Advance Strengthening and Plyometric Drill Phase (Weeks 20 to 24):

- Implement a full gym strengthening program; Begin straight plane running
- Begin linear running progression
- Gradually progressing to lateral and rotational drills
- Continue with aggressive lower extremity strengthening, cardiovascular training, and flexibility
- Plyometric drills, bilateral to unilateral as tolerated
- Follow-up examination with the physician
- Brace fitting for functional knee brace
- Sports test for return to competition