



Arthroscopic ACL Reconstruction

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PHASE I

Pre-op

Goals: Regain FROM (full-range of motion), some strength and decrease swelling.

- Eligible for surgery when there is no swelling and FROM, as well as an understanding of post-op rehab plan.

PHASE II

0 - 2 weeks

Goals: Achieve full extension, 90° flexion and maintain quad control

- No brace is used unless there are associated ligament injuries, a meniscus repair, or need to prevent hyperextension in patients with generalized ligamentous laxity.
- Weight-bearing as tolerated
- If a meniscus repair was done → TTWB 4 - 6 weeks based on repair
- No flexion past 90° for 4 weeks if meniscus was repaired.
- Work hard to achieve extension of 0° (no hyperextension)
- Quad control with quad sets, SLR's
- Patella and scar mobilization

PHASE III

3 - 6 weeks

Goals: Maintain full extension, achieve FROM and begin strengthening.

- Closed chain leg press 0 - 45°
- Short step-ups, ≤8 inches
- Lateral lunge 0 - 45°
- Calf strength with standing heel raise
- Stationary bicycle, swimming with flutter kick

PHASE IV

6 - 12 weeks

Goals: Maintain motion, increase strength and agility

- Closed chain leg press and squats to 90°, add weight as tolerated
- Tall step-ups, > 8 inches
- Balance board
- Continue stationary bike, add stair-stepper, elliptical trainer
- Basic agility drills and proprioception drills

PHASE V

12 weeks – full recovery

Goals: Achieve full strength and agility, return to sport

- Continue to increase strength with closed chain activities - Plyometrics
- Agility drills: lateral slides, cariocas, rope jump, stair & shuttle run
- When strength of operated leg is >70 % of opposite side→ start progressive running program
- Return to sport may be considered when strength of operated leg is >85% of normal leg, no swelling, FROM, good agility
- Return to sport schedule: performance of sport-specific drills individually→ performance of controlled team drills→ part-time competition while monitoring ROM and swelling→ return to full competition



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