



ACL Reconstruction Hamstring Autograft / Allograft
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Patient Name _____ Date _____

Procedure: [] Right [] Left [] ACL Reconstruction with Hamstring [] Autograft [] Allograft
Associated Procedure: (check if applicable) [] Meniscectomy [] Meniscal Repair

[] Evaluate and Treat – no open chain or isokinetic exercises

[] Provide patient with home exercise program

[] Phase I (0-6 wks): Period of protection***

- Weight bearing as tolerated without assist by post-op day 10. Patients in hinged knee braces should be locked in extension while ambulating for the first 2 weeks after surgery; the brace can then be gradually weaned and discontinued for daytime activity once SLRs can be done with no lag and ambulation is without a limp. Regardless of daytime use, patients should wear their braces locked in extension during sleep for the first 6 weeks after surgery.
ROM: progress through passive, active and resisted ROM as tolerated. Extension board and prone hang with ankle weights (up to 10 lbs) recommended. Stationary bike with no resistance for knee flexion (alter set height as ROM increases). Goal: full extension by 2 weeks, 120 degrees of flexion by 6 weeks).
Patellar mobilization, 5-10 minutes daily.
Strengthening: quad sets, SLRs with knee locked in extension. Begin closed-chain work (0-45 degrees) when full weight-bearing. No restrictions to ankle/hip strengthening.

***Note: if a meniscal repair was done simultaneously, please amend the above with the following restrictions:

- WBAT with brace limited to 0-90 degrees x 4 weeks
Limit ROM 0-90 degrees x 4 weeks
No tibial rotation x 4 weeks

[] Phase II (6-12 wks): Advance strengthening.

- Transition to custom ACL brace if ordered by physician.
ROM: continue with daily ROM exercises (goal: increase ROM as tolerated)
Strengthening: increase closed-chain activities to 0-90 degrees. Add pulley weights, theraband, etc.. Monitor for anterior knee pain symptoms. Add core strengthening exercises.
Add side lunges and/or slideboard.
Continue stationary bike and biking outdoors for ROM, strengthening, cardio.

[] Phase III (3-18 months): Begin more sport-focused conditioning.

- Advance strengthening as tolerated, continue closed-chain exercises. Increase resistance on equipment.
Initiate agility training (figure 9s, cutting drills, quick start/stop, etc.). Some patients may be cleared by MD earlier.
Begin plyometrics and increase as tolerated.
Begin to wean patient from formal supervised therapy encouraging independence with home exercise program.

[] Other:

- Modalities [] May participate in aquatherapy after [] Ultrasound
Heat before/after [] week three, begin aqua-running week 6 [] Ice before/after exercise
Electrical Stimulation

Frequency: _____ x/week x _____ weeks

By signing this referral, I certify that I have examined this patient and physical therapy is medically necessary.

This patient ___ would ___ would not benefit from social services.

Physician Signature

Date

Printed Name

