

**Bonnie P. Gregory, MD**  
**ACL & POSTEROLATERAL CORNER RECONSTRUCTION**  
**REHABILITATION PROTOCOL**

	<b>WEIGHT BEARING</b>	<b>BRACE</b>	<b>ROM</b>	<b>EXERCISES</b>
<i>PHASE I</i> <i>0-6 weeks</i>	Heel touch WB in brace *	0-2 weeks: Locked in full extension for ambulation and sleeping <b>2-6 weeks:</b> Unlocked for ambulation 0-90, remove for sleeping**	0-2 weeks: 0-45 <b>2-6 weeks:</b> Advance slowly 0-90	Quad sets, patellar mobs, gastroc/soleus stretch SLR w/ brace in full extension until quad strength prevents extension lag Side-lying hip/core Hamstrings avoidance until 6 weeks post-op
<i>PHASE II</i> <i>6-12 weeks</i>	Advance 25% weekly until full by 8 weeks	Discontinue at 6 weeks if no extension lag	Full	Begin toe raises, closed chain quads, balance exercises, hamstring curls, stationary bike, step-ups, front and side planks; advance hip/core
<i>PHASE III</i> <i>12-16 weeks</i>	Full	None	Full	Advance closed chain strengthening Progress proprioception activities Begin stairmaster, elliptical and running straight ahead at 12 weeks
<i>PHASE IV</i> <i>16-24 weeks</i>	Full	None	Full	16 weeks: Begin jumping 20 weeks: Advance to sprinting, backward running, cutting/pivoting/changing direction, initiate plyometric program and sport-specific drills
<i>PHASE V</i> <i>&gt; 6 months</i>	Full	None	Full and pain-free	Gradual return to sports participation after completion of FSA Maintenance program based on FSA

- ❖ Modified with concomitantly performed meniscus repair/transplantation or articular cartilage procedure
- ❖ Brace may be removed for sleeping after first post-operative visit (day 7-10)
- ❖ Completion of FSA (Functional Sports Assessment) not mandatory, but recommended at approximately 22 weeks post-op for competitive athletes returning to play after rehab

For any questions or concerns regarding the protocol or rehabilitation process please contact

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