

Keith Corpus, MD

Patella Tendon Debridement/Repair (Jumper's Knee)

This information and protocol is a guideline, individual variations and changes will apply

| <u>Postop</u> | <u>Goals</u> | <u>Precautions</u> | <u>Exercises</u> |
|--|--|---|--|
| Weeks 0-2 PT 1-2x/week HEP daily | Edema and pain control Maintain full extension Limit quad inhibition | WBAT Brace locked ambulation & sleep Remove brace exercise & hygiene Avoid prolonged standing/walking | P/A/AAROM flexion/extension, no limits Quadriceps isometrics & re-education Patella mobilization Emphasize full passive extension Proprioception training Hip progressive resisted exercises |
| Weeks 2-6 PT 2-3x/week HEP daily | Full ROM Minimal swelling Normalize gait Ascend/Decent 8" stair Reciprocate stairs Return to normal ADLs | WBAT DC brace when quad sufficient Avoid pain with therapeutic exercises and functional activities | Continue above Closed chain strengthening Step up/step down program Elliptical |
| Weeks 6-12 PT 2-3x/week HEP daily | Full ROM Return to normal activity Run pain free Maximize strength/flexibility | Avoid pain with therapeutic exercises and functional activities | Continue above Progress closed chain activities Begin hamstring work Leg press 0-90 Advance proprioception |
| Weeks 12-20 PT 2-3x/week HEP daily | Full ROM Maximize strength Adequate endurance Apprehension free activity | Return to sport (MD directed) | Continue above Advance CORE, glutes, eccentric hamstrings, elliptical, and bike Initiate running when able to descend 8" step without pain/deviation Plyometrics when stable base Swimming OK at 12 weeks Running/jumping at 16 weeks |