OSF HEALTHCARE

ACL Reconstruction

Postop	Goals	Precautions	Exercises/Interventions
Weeks 0-2 **1x/ week** **HEP Daily**	Full Passive Extension Minimum 90° knee flexion Edema & pain control SLR without lag Patella mobility	WBAT with crutches Brace locked at 0° for ambulation Brace locked at 0° for sleeping	Passive extension Quad re-education & SLR Bilateral leg press 5-75° Hip / Core training Half-revolution ergometry Introductory proprioceptive training
Weeks 2-6 **2-3/ week** **HEP Daily**	Full passive extension Positive Active Heel Pop test ROM 0-125° Symmetric Pain Free Gait Improve Quad Control Normalize patellar mobility Ascend 8” step	DC crutches when: • Full passive TKE • Full TKE utilized in gait • No swelling >1cm from contralateral • No SLR lag Brace locked at 0° x4 wks for ambulation then open to 0-90 deg for weeks 5 and 6 Avoid reciprocal stairs until adequate quad control Quality movement emphasis	Emphasize full passive extension Full ergometry Closed chain knee flexion 0-90 degrees (Squat progression, leg press, lunges) OKC knee extension without resistance 90-40° Quad Isometrics at 90° when 110° knee flexion present Initiate step up program Proprioceptive training
Weeks 6-16 **1-2x/week** **HEP Daily**	Full ROM Forward step down with control Build strength Protect patellofemoral joint	WBAT DC brace when adequate quad strength Avoid painful activities Running not to start before 12 weeks (**not until 18 weeks for Dr. Below)**, and should start after criteria are met: • No Pain or Effusion • SL Leg Press 1x body weight for 8 repetitions OR SL Squats to 75 degrees for 8 repetitions • Isolated Quad Strength >70% LSI • Introductory single leg landing exercises without compensation • IKDC score > 64	Progress closed chain depth & load Initiate step-down program OKC resisted knee extension 90-40°, then 90-20° at 12 weeks Advance proprioceptive training Elliptical, Stair stepping machine, Retrograde Treadmill
Weeks 16-26 **1-2x/ week** **HEP Daily**	Symptom free running Maximize strength / flexibility Meet running & unilateral plyometric progressions	Avoid painful activities **Dr. Below: Running can start around 18-20 weeks with ACL Functional Brace on flat surface**	Initiate forward running program when 8” step-down satisfactory OKC resisted knee extension unrestricted Advance agility program Progress Unilateral plyometrics when: • Quad Strength Symmetry >80% LSI • SL Leg Press 1.5x body

	weight for 8 reps • SL Squat to 90 degree Progressive Sport specific drills Return to Sport testing if appropriate (see Return to Sport Protocol)

Considerations:
Return to Sport Timelines:

- **Level I Sports (High Risk)**
  - **Examples:** Soccer, basketball, football, rugby, lacrosse, singles tennis, volleyball, downhill skiing, hockey
  - **Typical Return-to-Sport Timeline:** No earlier than 9 months after surgery. Most athletes return between 9–12 months.
  - Non-contact practice → Full practice → Full play (~9 mo)
  - Each month delayed between 6-9 months decreases re-tear risk 50%
- **Level II Sports (Moderate Risk)**
  - **Examples:** Baseball, softball, doubles tennis
    - Baseball / Softball – Hitting should be slowed if lead leg is involved. Limit sliding.
  - **Typical Return-to-Sport Timeline:** Typically, between 6–9 months after surgery, depending on individual progress, testing and positional requirement
- **Level III Sports (Low Risk)**
  - **Examples:** Golf, swimming (freestyle and backstroke), cycling, elliptical, light hiking, straight-line jogging.
    - Golf – Power hitting / driving should be slowed if lead leg is involved.
    - Swimming – No flip turns or breaststroke kicking.
    - Cycling – No Mountain biking.
  - **Typical Return-to-Sport Timeline:** Usually between 3–6 months after surgery, depending on the specific activity.

Physician-Specific

- Dr. Below: Use of bicycle for ROM after 3 weeks

Typical Schedule of follow-up visits with physician after surgery:

- Dr. Corpus follow up schedule
  - PA 2 weeks
  - MD 6 weeks, 3 months, 6 months, 9 months
- Dr. Below: 1, 6, 12, 18, 24, 30 weeks

Dressings:

Dr. Corpus

- Dermanet dressing can stay on until follow up as long as clean and dry.
- Able to bathe right away, just keep dressings dry.
- ACE wrap bandage stays for 2-3 days for swelling

Dr. Below

- Usually removed around 1 week by **ORTHO ONLY** – do not remove in rehab (shower only until then)
- TED hose x 3 weeks