

Quad Tendon/Patellar Tendon Repair/Reconstruction

Post-op	Restrictions/Precautions	Rehabilitation Tips
Weeks 0-4	<p><u>Weight Bearing:</u> PWB x 2 weeks, then WBAT</p> <p><u>T-Scope:</u> locked at 0 deg</p> <p><u>Strengthening:</u> hold WB strengthening x 6 weeks</p>	<p><u>First PT visit:</u> 3 days PO</p> <p><u>Patient Education:</u> surgical restrictions/precautions, symptom management, ACE wrap for swelling management, wound care</p> <p><u>Wound Care:</u> remove post-operative bandages/dressing after 72 hours; can shower at 72 hours; submerge at 2 weeks PO</p> <p><u>Manual Therapy:</u> multi-directional patellar mobilization PROM, local STM as needed</p> <p><u>PROM:</u></p> <ul style="list-style-type: none"> • 0-30 deg weeks 0-2 • 0-60 deg weeks 2-4 <p><u>Stretching:</u> Calf & hamstring in long-sitting</p> <p><u>Neuromuscular Control:</u> Quad sets (w/ NMES), additional isometrics, weight shifting</p> <p><u>Strengthening:</u></p> <ul style="list-style-type: none"> • Isometrics • Prone TKE • Prone HS curls • SLR 4-way (in brace until no quad lag present) <p><u>BFR:</u> consider as early as 2 weeks PO</p> <p><u>Modalities:</u> as needed – consider NMES/TENS, biofeedback, vasopneumatic compression</p>
Weeks 4-6	<p><u>Weight Bearing:</u> WBAT</p> <p><u>T-Scope:</u> unlocked to 45 deg pending quad control</p> <p><u>Strengthening:</u> hold WB strengthening x 6 weeks</p>	<p><u>Patient Education:</u> surgical restrictions/precautions, brace & crutch progression</p> <p><u>Manual Therapy:</u> multi-directional patellar mobilization PROM, local STM as needed</p> <p><u>PROM:</u></p> <ul style="list-style-type: none"> • 0-90 deg weeks 4-6, then progress as tolerated to full PROM, monitoring for appropriate progress <p><u>Stretching:</u> incline calf, hamstring, quad & hip stretching as needed</p> <p><u>Neuromuscular Control:</u> gait training, basic balance and proprioceptive training</p>

Weeks 4-6 cont.		<p><u>Strengthening:</u></p> <ul style="list-style-type: none"> • SLR (in locked brace supine until able to complete without quad lag) • Quad: <ul style="list-style-type: none"> ○ LAQ at 6 weeks PO, progressive ankle weight ○ Standing TKE w/ resistance • Hamstrings/Hips/Core: within surgical restrictions & tolerance <p><u>BFR:</u> continue until standard strengthening program is well tolerated</p> <p><u>Modalities:</u> as appropriate based on needs</p>
Weeks 6-9	<p><u>T-Scope:</u> unlock to 90 deg and d/c pending quad control and gait mechanics</p> <p><u>Strengthening:</u> avoid heavy quad load + knee flexion (ie. ant step down; “knees over toes”)</p>	<p><u>Patient Education:</u> surgical restrictions/precautions, weight bearing progression, brace & crutch progression</p> <p><u>Manual Therapy:</u> multi-directional patellar mobilization PROM, local STM as needed</p> <p><u>PROM:</u> full PROM, monitoring for appropriate progress</p> <p><u>Stretching:</u> incline calf, hamstring, quad & hip stretching as needed</p> <p><u>Stationary Bike:</u> at 6-8 weeks PO once 90 deg is obtained; no resistance</p> <p><u>Neuromuscular Control:</u> gait training, basic balance and proprioceptive training</p> <p><u>Strengthening:</u></p> <ul style="list-style-type: none"> • SLR (in locked brace supine until able to complete without quad lag) • Quad: <ul style="list-style-type: none"> ○ Multi-angle isometrics at 6 weeks PO – 90-60 deg only ○ LAQ at 6 weeks PO, partial ROM > full ROM; progressive ankle weight • Initiate CKC strengthening (protected range) • Hamstrings/Hips/Core/Lower Leg: within surgical restrictions & tolerance <p><u>BFR:</u> continue until standard strengthening program is well tolerated</p> <p><u>Modalities:</u> as appropriate based on needs</p>

Weeks 9-12		<p><u>Cardio</u>: low impact cardio</p> <p><u>Stretching</u>: end-range quadriceps, additional muscles as needed</p> <p><u>Strengthening</u>:</p> <ul style="list-style-type: none"> • Quad: <ul style="list-style-type: none"> ○ Multi-angle isometrics 90-0 deg ○ Progressive OKC strengthening <ul style="list-style-type: none"> ▪ Knee Ext Machine at 10-12 weeks – partial range > full range; DL > SL • CKC <ul style="list-style-type: none"> ○ Progressing toward deeper depths per tolerance, monitoring form and avoiding compensation; DL > SL ○ Begin heavier quad loaded activity (ie. ant step down/heel tap) • Functional movement patterns per tolerance • Hamstrings/Hips/Core/Lower Leg: within surgical restrictions & tolerance <p><u>Neuromuscular Control</u>: progressive balance and proprioceptive training</p>
Weeks 12+	<u>Avoid</u> : high impact activity until cleared via RTP guidelines at 6+ months PO	<p>Progressive low-impact cardio, lower body strengthening, balance, proprioception and dynamic stability programming based on tolerance.</p> <p><u>Isokinetic strength testing</u>: 6 months PO at earliest. Progress per Mercy Health LE RTP guidelines for running, jumping and full RTP.</p>