

NONOPERATIVE ISOLATED LCL TEAR REHABILITATION PROTOCOL

- This program is for grade I and II LCL tears. Grade III LCL tears should undergo surgical treatment. The following schedule serves as guidelines to help in the expediency of returning a patient to his or her pre-injury state.
- Please note that if there is any increase in pain or swelling or loss of range of motion these serve as signs that the progression of the patient may be too rapid.

I. PHASE I- MAXIMAL PROTECTION PHASE

Goals: Early protected ROM, Prevent quadriceps atrophy, Decrease effusion/pain

A. 0 to 2 weeks

- Ice, compression, elevation
- Knee hinge brace locked at 30 degrees for 6 weeks, except during PT
- Crutches, partial weight-bearing
- Range of motion
 - Begin aggressive patella mobility
 - ROM 30-90 degrees with valgus stress applied during PT
 - Multi-plane straight leg raising

B. 2 to 6 weeks

- Continue above exercises
- Range of motion
 - 0-90 degrees (NO HYPEREXTENSION)

II. PHASE II- PROGRESSIVE STRETCHING AND EARLY STRENGTHENING

A. 6 to 12 weeks

- Continue with modalities to control inflammation
- May begin to progressively increasing weight bearing IN MEDIAL UNLOADER BRACE (to be worn AT ALL TIMES when weight bearing)
- Range of Motion
 - Full knee extension (no hyperextension)
 - Knee flexion to 120°, progress as tolerated
- Exercises
 - Continue with phase I exercise
 - Bilateral closed kinetic chain squatting
 - Multi-plane open and closed kinetic chain hip strengthening
 - Step-up progression
 - Stationary biking

- Pool program; focus on ROM
- Proprioception drills Stairmaster endurance work

III. PHASE III- ADVANCED STRENGTHENING AND PROPRIOCEPTION PHASE

A. Weeks 12 to 16

- Range of Motion
 - Full knee flexion and extension
- Exercises
 - Advance strengthening program progressing to unilateral as tolerated
 - Increase intensity of stationary bike program may add treadmill walking
 - Advance intensity of pool program; focus on strengthening.

B. Weeks 16 to 20:

- Range of Motion
 - Full knee flexion and extension with terminal stretch
- Exercises
 - Advance cardiovascular program; no running
 - Increase intensity of closed kinetic chain exercises
 - Advance proprioception drills
 - Initiate gym strengthening progressing from bilateral to unilateral as tolerated
 - Leg press, squats, partial lunges, hamstring curls, ab/adduction, calf raises
 - Increase intensity of bike and walking program, may add elliptical trainer

C. Weeks 16 to 20:

- May begin a pool running program

IV. PHASE IV- ADVANCE STRENGTHENING AND PLYOMETRIC DRILL PHASE

A. Weeks 20 to 24:

- Implement a full gym strengthening program; including leg extensions at 30° - 0°, progressing to
- full range as PF arthrokinematics normalize
- Begin straight plane running
- Begin controlled lateral functional cord drills:

V. PHASE V – RETURN TO SPORT AND FUNCTIONAL DRILLS PHASE

A. Weeks 24 to 28:

- Continue with aggressive lower extremity strengthening, cardiovascular training, and flexibility
- Implement multidirectional agility drills
- Begin plyometric drills from bilateral to unilateral as tolerated

B. Weeks 28 to 32:

- Follow-up examination with the physician
- Brace fitting for functional knee brace
- Sports test for return to competition