

**Dr Craig Chike Akoh, M.D.  
NONOPERATIVE ACL TEAR REHABILITATION PROTOCOL**

	<b>WEIGHT BEARING</b>	<b>BRACE</b>	<b>FOCUS</b>	<b>ROM</b>	<b>EXERCISES</b>	<b>PRECAUTIONS</b>
<i>PHASE I</i> Acute Phase	*WBAT with crutches and progress to FWB and d/c crutches when patient can demonstrate normal gait mechanic	Functional knee brace unlocked	*Control pain and swelling *Restore pain free ROM *Restore normal gait mechanics *Establish good quadriceps activation	*Emphasize knee extension equal to contralateral limb *Goal is to achieve full flexion	-Quad/Add sets, SLR (no lag), hip -Abd/Add/Ext/ER, partial range squats, standing TKE, standing or prone hamstring curl, heel raises	*Minimize joint effusion and edema *Alert physician if patient reports episodes of knee buckling
<i>PHASE II</i> Sub-Acute Phase	FWB	Functional knee brace unlocked	*Maintain ROM and flexibility *Progress strengthening *Improve neuromuscular control	*Maintain full ROM and optimize LE flexibility	Continue Phase 1 strengthening, leg press, leg curl machine, step-ups, squats, plank series, single-limb balance Single-limb balance exercises	*Minimize joint effusion and edema *Alert physician if patient reports episodes of knee buckling *Avoid patella femoral joint stress
<i>PHASE III</i> Limited return to sports	FWB Straight ahead jogging per physician approval	Functional knee brace unlocked	*Maintain ROM and flexibility *Maximize strength, initiate single leg exercises *Maximize neuromuscular control *Initiate plyometrics and light jogging *Initiate return to sport/work activities with physician approval	*Maintain full ROM and optimize LE flexibility	-Bicycle/elliptical/treadmill with progressive resistance -Progress Phase 2 strengthening, step-up progressions, single-limb dead lifts, static lunges -Single-limb balance with perturbations -Double-limb simple and complex plyometrics	*Alert physician if patient reports episodes of knee buckling *Avoid patella femoral joint stress especially with plyometrics *Monitor increased knee effusion with plyometrics *Caution pivoting or lateral movements *Not cleared to return sports
<i>PHASE IV</i> Return to sports	Full	Functional knee brace as needed	* Maintain ROM, flexibility, and strength *Continue dynamic strengthening and proprioceptive exercises	*Continue daily LE stretching I	-Continue daily stretch -Bicycle/elliptical/treadmill with progressive Resistance -Progress Phase 3 strengthening, increase load and decrease repetitions	*Alert physician if patient reports episodes of knee buckling *Avoid patella femoral joint stress especially with plyometrics

			<ul style="list-style-type: none"><li>*Continue plyometrics and initiate agility training</li><li>*Progress sport specific drills</li></ul>		<ul style="list-style-type: none"><li>-Progress Phase 3 proprioceptive training increasing difficulty of drills</li><li>-Begin single-limb plyometrics, advance double-limb and single-limb combination jumps</li><li>-Begin speed and agility program</li></ul>	<ul style="list-style-type: none"><li>*Monitor increased knee effusion with plyometrics</li><li>*Caution pivoting or lateral movements</li><li>*Cleared for return to sport per physician</li></ul>
--	--	--	---	--	--	---