Medial Patellofemoral Ligament Reconstruction/ Repair Saint Louis UniversitySSM Health Physical Therapy Orthopedic Residency

These guidelines, treatments, a**md**lestones have been established to assist in guiding rehabilitation based on the most current available evidence. They are not intended to be substitute for sound clinical judgement with consideration of the individual contextual features of the patient and the demands of various functions/sports.

Additional recommendations with additional procedure of Tibial tubercle osteotomy

Medial Patellofemoral Ligament Reconstruction/ Repair Saint Louis University SSM Health Physical Therapy Orthopedic Residency

Single leg stance >30 sec without deviation of hip **dkope** valgus or overpronation

Recommendations

Begin CK©trength (ex: mini Squats, heel raises, progressive step up/down, SL squats, leg press lunges)^{4,5,10}

Ensure appropriate alignment during these activities avoiding contributory movements into knee valgus

Progress OKC strength (ex: resisted will Rbrace off if no extensor laged extension without weight, hamstring PRE^{5,10}

Balance and proprioception (ex: SLB, uneven surface, eyes closedunes)d Stationary biking

Weeks7 t9

Recommend weekly PT follow up

Milestone to discontinue brace proceed to next phase

Restoration of normalized gait mecharlics
Reassessment of ANE Score
Improved score for PSFS by points
Reciprocal ascenand descenorishinch step with rails
KneeAROM 0120 degrees

Recommendations

Medial Patellofemoral Ligament Reconstruction/ Repair

Saint Louis University SSM Health Physical Therapy Orthopedic Residency

Adapted from: 2013 ISAKOS Sports Medicine Committee RetBtay Criteria, London 20143

No concerns of knee pain or knee instability

Full/ near full AROM of knee

No knee effusion

Acceptable control with dynamic activities (Star Excursialance Test)

Limb Symmetry Index >85% on hop tests

Full Strength on MMT assessment of LE

Athlete demonstrates a psychological readiness to return to sport (eg SANE score > 80/100)

& CE (µ • š] V • CE P CE] v P š Z ‰ š] v š [• inusuralince oquestations v Á) CE please contact your physician's office directly

For additional questions, comments, or concerns regarding the implementation of these physical therapy guidelines please contact Chris Sebelski, PT, DPT, PhD, OCS, Direct@ldftl\ssM Health Physical Therapy Residency @ 314 977 8724 OR chris.sebelski@health.slu.edu

Please respond to our anonymous survey regarding these guidelines to assist in improving patient care and advocacy.https://slu.az1.qualtrics.com/jfe/form/SV_bpX7Z9AaVTzGblj

Appendices of referenced assessments

References:

1. < ΂ Z : U K [D o o Ç D W U : } Z v • } v E Z U š o X & μ v š] } v o š • š] v P stabilization surgery for recurrent lateral patellar instability in competitive athlettense Surg Sports TraumatoArthrosc 2018;26(3):71-718. doi:10.1007/s0016/016-4409-2

2.

Medial Patellofemoral Ligament Reconstruction/ Repair Saint Louis UniversitySSM Health Physical Therapy Orthopedic Residency