

Justin J. Ernat, MD's Nonoperative ACL Injury Rehabilitation

DX: NON-OPERATIVE {Left/Right:5519} Knee, ACL Injury

- CRUTCHES: ***Crutch use for comfort and stability as needed. Not required.
- WEIGHT-BEARING: ***May be full weight bearing as tolerated.
- BRACE: ***Hinged knee brace may be used for stability as needed.

GOALS:

- 1) Decrease pain, inflammation and muscle guarding.
- 2) Promote healing of soft tissues.
- 3) Early protected ROM, prevent quadriceps atrophy, increase pain-free ROM as tolerates.
- 4) Ice, compression, elevation, play-maker or hinged knee brace.
- 5) Crutches as needed, FWBAT.
- 6) Full painless knee PROM, AAROM, AROM, RROM progression as tolerates.
- 7) Quad, hamstring, and hip strength - quad sets, SLR, TKE.
- 8) Progress as tolerates to mini squats, lunges, 4-way hip, hip abd/adduction, stationary bike, elliptical, stair master.
- 9) Aquatic therapy if desired.
- 10) Balance work, gait training, core work.
- 11) Avoid deep squats, and heavy patellofemoral shear and loading;
- 12) Modalities per therapist discretion, electrical stimulation to quad;
- 13) Please teach HEP the patient can do multiple times a day on their own at home.

May attend up to 1-3 times weekly for 8-12 weeks.