

MPFL RECONSTRUCTION WITH AMZ (ANTEROMEDIALIZATION / TIBIAL TUBERCLE OSTEOTOMY) REHABILITATION PROTOCOL

Phase I: Weeks 0-2

- Weight Bearing: Foot Flat with brace locked in Full Extension
- Brace:
 - o Locked in full extension at all times.
 - May take off for exercises or hygiene
- CPM
 - o 0-90° for at least 6-8 hours/day
- ROM:
 - o Goal is symmetric extension (including hyperextension)
 - o Gentle Passive Flexion 0-90°
- Exercises
 - Quad/Hamstring sets, SLR in brace ,Ankle pumps, heel props, calf stretching, gentle patellar mobs

Phase II: Weeks 2-6

- Weight Bearing:
 - o 2-6 Weeks: Foot Flat weight bearing
- Brace:
 - Locked in full extension when up ambulating
 - o Unlocked 0-90° when NWB
- ROM:
 - Maintain symmetric extension
 - o Progress flexion as tolerated while Non weight bearing.
 - o Goal of 125° flexion.
- Exercises:
 - o Add Side lying hip/gluteal/core exercises, stretching
 - o May begin light scar massage once incision is healed (~3-4 weeks)

Phase III: Weeks 6-10

- Weight bearing
 - o Begin 25% WB and advance 25% each week until full by 10 weeks
- Discontinue Brace

- Progress to Full symmetric ROM,
- Exercises:
 - o Progress closed chain exercises/ hip/core/gluteal exercises
 - o Advance hamstring work, proprioception/balance exercises
 - o Begin stationary bike at 10 weeks
 - o Minimize swelling

Phase IV: 10-16 weeks

- Normalize Gait pattern
- Exercises:
 - o Progress Phase III CKC exercises and functional activities
- Advance core/glutes and balance
- May add elliptical trainer and swimming at 14 weeks

PHASE V 6-12 months

- Advance all activity as directed.
- Jogging at 16 weeks with MD approval.
- Progress to independent home exercise program.
- When Cleared by MD may begin impact such as running, jumping, pivoting, sports specific activity
- Return to Sport when cleared by MD