

ACL Reconstruction with Quadriceps Tendon Autograft Protocol

	Weight-bearing	Brace	Range of Motion	Exercises
Phase 1 0-4 weeks	Full in brace (a)	0-2 week: Locked in full extension for ambulation and sleeping 2-4 weeks: Unlocked for ambulation, remove for sleeping (a)	As tolerated 0-90° by 2 weeks	Heel slides, quadriceps/hamstring sets, patellar mobilization, calf (gastrocnemius/soleus) stretch SLR w/ brace in full extension until quadriceps strength prevents extension lag Side-lying hip/core
Phase 2 4-12 weeks	Full, progressing to normal gait pattern	Discontinue at 4 weeks if quadriceps control is adequate (no extension lag)	Gain full and pain-free	Begin toe raises, closed chain quads, balance exercises, hamstring curls, stationary bike, step-ups, front and side planks, hip/glute/core
Phase 3 12-16 weeks	Full with a normalized gait pattern	None	Full	Advance closed chain strengthening Progress proprioception activities Begin stair climber, elliptical at 8 weeks and running straight at 12 weeks when 8" step down is satisfactory
Phase 4 16 weeks – 6 months	Full	None	Full	16 weeks: Begin jumping 20 weeks: Advance running to sprinting, backward running, cutting, pivoting, changing direction, initiate

				<p>plyometric program and sport-specific drills</p> <p>22 weeks: Advance as tolerated</p> <p>FSA completed at 22 weeks (b)</p>
<p>Phase 5 6-12 months</p>	Full	None	Full	<p>Gradual return to sports participation after completion of functional sports assessment (FSA)</p> <p>Maintenance program based on FSA</p>
<p>SLR – Straight-leg raise</p> <p>(a) Modified with concomitantly performed meniscus repair/transplantation or articular cartilage procedure</p> <p>(b) Completion of FSA (Functional Sports Assessment) is not mandatory, but is recommended at approximately 22 weeks post-op for competitive athletes returning to play after rehabilitation</p>				