

**ACL Reconstruction
without meniscus
repair (i.e.-
isolated ACLR +/-
partial
meniscectomy)**



Rehab Protocol
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**** Please follow MOON protocol for specifics ... this just clarifies weight-bearing, ROM and brace use**

	<p>Immediate post-op Week 1</p>	<ul style="list-style-type: none"> • Immediate WBAT locked straight – prn crutches for support <ul style="list-style-type: none"> - Start to WB 0-30/0-60 in brace as pain allows (encourage within first couple days post-op)** - Discontinue crutches as comfort & gait safety allows - This restriction is for home guidance, but encourage out of brace ambulation in PT clinic Brace – Only needed when sleeping during 1st week ... then D/C • Encourage full NWB ROM, active & passive • Bike for ROM, not for cardio • Encourage patellar glides, SLR / quad sets, hip add / abd • NMES unit for quad recruitment <p>* Goal is to start WB flexion ASAP ** Note – Allograft ACLR only need brace w/ WB the 1st Week Autograft ACLR may need until 3rd Week</p>
	<p>Weeks 2-4</p>	<ul style="list-style-type: none"> • Push WBAT with brace unlocked 0-60 during Week 2. Unlock to 90 during Week 3 or ASAP Brace – Not needed during sleep. Goal is to D/C by Week 3 • Bike for ROM and early cardio • NMES unit for quad recruitment • Scar management with Vitamin E oil
	<p>Months 2-12</p>	<ul style="list-style-type: none"> • Progress with MOON protocol or equivalent (per PT)

General ACL Graft Principles:

-ACLR with allograft: progress with WB flexion early as quad control allows; start hamstring (HS) activities (stretches, ROM, strengthening) as comfort allows

-ACLR with quad autograft: no restrictions in quad ROM and strengthening (pain and control typically improves around 3-5 week mark); start HS activities as comfort allows

-ACLR with hamstring autograft: HS stretching ok at 3-4 weeks and HS strengthening at 6-8 weeks

-ACLR with patellar tendon autograft: same as quad autograft in general; anterior knee pain / quad weakness persists longer than allograft / quad auto / HS auto