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Patellar Tendon Repair Rehabilitation Guidelines

Phase I for Immobilization and Rehabilitation: 4-13 days

GOALS:

- Control pain and inflammation
- Maintain patellar mobility
- Maintain hamstring strength of the ipsilateral leg and lower extremity strength of the contralateral leg
- Active knee flexion to 45° and passive knee extension to 0°

Intervention:

- Crutch training with toe-touch weight-bearing
- Ice and elevation
- Isometric ipsilateral hamstring exercise, contralateral LE strengthening
- Gentle medial/lateral patellar mobilization (~25%)
- AROM, AAROM and PROM
- Hinged knee brace locked in extension

Phase II for Immobilization and Rehabilitation: 2-4 weeks

GOALS:

- Control pain and inflammation
- Begin weight-bearing
- Maintain patellar mobility
- Active flexion to 90° and passive knee extension to 0°
- Maintain ipsilateral hamstring and contralateral LE strength
- Begin ipsilateral quadriceps retraining

Intervention:

- Crutch training with partial weight-bearing (25-50%)
- Ice and elevation
- Isometric ipsilateral hamstring exercise, contralateral LE strengthening
- Gentle medial/lateral patellar mobilization (~25%)
- AROM, AAROM and PROM
- Hinged knee brace locked in extension
- Ipsilateral quadriceps sets (NO straight leg raises)

Phase III for Immobilization and Rehabilitation: 4-6 weeks

GOALS:

- Control pain and inflammation
- Progress weight-bearing (possibly discontinue crutch use)
- Active flexion progressed as tolerated and passive extension to 0°
- Maintain patellar mobility
- Maintain ipsilateral hamstring and contralateral LE strength

- Continue ipsilateral quadriceps retraining

Intervention:

- Progress to weight-bearing as tolerated, may discontinue crutch use if good quadriceps control is acquired
- Gait training
- Ice and elevation
- Isometric ipsilateral hamstring exercise, contralateral LE strengthening
- Gentle medial/lateral patellar mobilization (~25%)
- AROM, AAROM and PROM
- Hinged knee brace locked in extension
- Ipsilateral quadriceps sets (NO straight leg raises)

Phase IV for Immobilization and Rehabilitation: 6-12 weeks

GOALS:

- Control pain and inflammation
- Progress to full active ROM
- Maintain patellar mobility
- Maintain ipsilateral hamstring and contralateral LE strength
- Continue ipsilateral quadriceps retraining

Intervention:

- Weight-bearing as tolerated
- Gait training
- Hinged knee brace locked in extension until good quadriceps control and normal gait are obtained
- Ice and elevation
- Isometric ipsilateral hamstring exercise, contralateral LE strengthening
- Gentle medial/lateral patellar mobilization (~50%)
- AROM
- Ipsilateral quadriceps strengthening (straight leg raises without resistance and stationary cycling at 8 weeks)

Phase V for Rehabilitation: 12-16 weeks

GOALS:

- Complete weight-bearing
- Progress ipsilateral quadriceps strength
- Begin neuromuscular retraining

Intervention:

- Gait Training
- No immobilization
- Ipsilateral quadriceps strengthening
- Proprioception and balance activities (including single leg support)

Phase VI for Rehabilitation: 16-24 weeks

GOALS:

- Begin running
- Sport/Job specific training

Intervention:

- Progress program as listed for Phase IV, with sport or job specific training

Phase VII for Rehabilitation: >6 months

- May begin jumping and contact sports when ipsilateral strength is 85-90% of contralateral extremity