Quad Tendon Repair & Patellar Tendon Repair Brace Use:		Post-op protocol for Mathew Taylor, M.D. Orthopaedic Surgery & Sports Medicine Clinic Immediate WBAT with brace locked straight Sleep in brace for 4 weeks minimum ** Driving automatic car (also must be compliant safely getting in & out): Left leg surgery minimum 4 weeks & Right leg surgery minimum 8 weeks ** Protocol phases may delayed or altered if high risk patient: compliance, retracted / chronic tear, revision situation, medical comorbidities
Phase I: Protection	Week 1-2	 No PROM; WBAT locked straight Cryotherapy, NMES Quad sets, SLR in brace, patellar mobs, calf pumps
Phase II: Early ROM	Week 3-5	 Progressive NWB motion *active flexion / passive extension* Week 3: 0°-30° and progress 30°/week OK for terminal flexion stretch after 4 weeks Continue heel slides, aggressive patellar mobs Goal ROM: 90 easily by week 6 OK for SLR out of brace after 4 weeks While in brace: full core, glutes, isometric hamstring
Phase III: Early Strengthening	Week 6-10	 Progressive unlocking of brace in WB Week 6: 0°-30° and progress 30°/week Goal: full 0°-90° ambulation by week 10 D/C brace by 10 weeks: once full flexion achieved, good quad control, can perform SLR without extensor lag Aggressive terminal flexion stretch Stationary bike (ROM mainly, no significant resistance) Continue per therapist: short arc CKC strengthening as pain allows: per patient and therapist,
Phase IV: Strengthening	Week 12-20	 Progress to closed chain exercises. Begin hamstring work/lunges/leg press 0°-90° degrees, proprioception exercises, balance/core, hip and glutes. Continue to progress phase III exercises. Start functional activities: single leg balance, core, glutes, eccentric hamstrings, elliptical and bike. Advance to sport specific drills, running, jumping after 20 weeks once cleared by MD and PT
Special Notes:		