PATELLAR TENDON DEBRIDEMENT PHYSICAL THERAPY PRESCRIPTION

Diagnosis: s/p (LEFT / RIGHT) Patellar Tendinopathy -- Date of Surgery:

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WEEKS 1-3:
FORMCHECKBOX  HEP including SLR with brace in full extension and active assisted ROM to a goal of 45-90° by 3 weeks
FORMCHECKBOX  WBAT with brace locked in extension

WEEKS 3-4:
FORMCHECKBOX  Supervised PT – 3 times a week (may need to adjust based on insurance)
FORMCHECKBOX  Gentle patellar mobilization exercises
FORMCHECKBOX  Perform scar massage aggressively
FORMCHECKBOX  Emphasis full passive extension
FORMCHECKBOX  AAROM exercises (4-5x / day) – 0-90°
FORMCHECKBOX  ROM goal: 0-90°
FORMCHECKBOX  Flexion exercises PROM, AAROM, and with brace off
FORMCHECKBOX  Stationary bike for range of motion (short crank or high seat, no resistance)
FORMCHECKBOX  Hamstring and calf stretching
FORMCHECKBOX  Hip strengthening – specifically external rotators
FORMCHECKBOX  Isotonic leg press (0-60°)
FORMCHECKBOX  Unlock brace (0-60°) for ambulation when good quad control
FORMCHECKBOX  Progressive SLR program with weights for quad strength with brace off if no extensor lag (otherwise keep brace on and locked)
FORMCHECKBOX  Theraband standing terminal knee extension
FORMCHECKBOX  Proprioceptive training bilateral stance
FORMCHECKBOX  Double leg balance on tilt boards
FORMCHECKBOX  Add water exercises if desired (and all incisions are closed and sutures out)

WEEKS 5-6:
FORMCHECKBOX  Mini-squats (0-45°) and heel raises hamstring PREs
FORMCHECKBOX  Hamstring PREs
FORMCHECKBOX  4 inch step ups
FORMCHECKBOX  Seated leg extension (0-40°) against gravity with no weight
FORMCHECKBOX  D/C brace if adequate quad control and normal gait pattern
FORMCHECKBOX  Isotonic leg press 0-90°
FORMCHECKBOX  AAROM 4-5x’s day (no limits) goal 0-120°
FORMCHECKBOX  Initiate retro treadmill with 3% incline (for quad control)

WEEK 7:
FORMCHECKBOX  Continue all exercises
  Continue ROM stretching and overpressure into extension 4-5x’s day
  Goal: 0-130°
FORMCHECKBOX  Wall and / or ball squats (0-60)
FORMCHECKBOX  Eccentric leg press
FORMCHECKBOX  6 inch front step ups
FORMCHECKBOX  4 in step downs
FORMCHECKBOX  SLR’s – in all panes with weight
WEEK 8:
- Continue above exercises
- ROM 4-5x / day, Goal: full ROM
- Regular stationary bike if flexion > 115°
- 8 inch step ups
- 4 inch step downs
- Single leg proprioceptive training
- Lateral step out with therabands
- Retro treadmill progressive inclines
- Sport cord (bungee) walking
- Increase resistance on stationary bike
- Squats 0-90

WEEK 9:
- Continue above exercises
- Open chain knee extension no resistance
- Stairmaster machine
- Brisk walking
- Progress balance and board throws
- 6 inch step downs

WEEK 10:
- Bike outdoors, level surfaces only
- Start slide board
- Plyometric leg press
- 8 inch step downs

WEEK 11:
- Begin resistance for open chain knee extension
- Jump down’s (double stance landing)
- Plyometric program
- Progress to running program and light sport specific drills if:
  - Quad strength > 75% contralateral side
  - Active ROM to > 125°
  - Functional hop test > 70% contralateral side
  - Swelling < 1 cm at joint line
  - No pain
  - Demonstrates good control on jump down

WEEKS 12-22:
- If full ROM, quad strength > 80% contralateral side, functional hop test > 85% contralateral side, satisfactory clinic exam:
  - Progress to home program for running. Start backward jogging, figure of 8, zigzags and lateral shuffles. Progress to hops, jumps, cuts and sports specific drills. Begin to wean from supervised therapy
- Criteria to return to sports
  - Full Active ROM
  - Quadriceps and hip external rotators strength > 90% contralateral side
Satisfactory clinical exam
Functional hop text > 90% contralateral side
Completion of running program

Treatment: _______ times per week          Duration: _______ weeks          ___
Home Program

**Please send progress notes.

Physician’s Signature: ___________________________  Date: _____________________

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