

# **PCL Non-Operative Rehabilitation Protocol**

Phase I (0 - 4 Weeks)

#### Maximum Protection Phase

#### Goals:

- 1. PCL ligaments protection.
- 2. Decrease pain and inflammation.
- 3. Decrease edema/joint effusion.
- 4. Quadriceps activation.
- Brace locked at 0°, sleep with brace on.
- PWB with crutches 0-2 weeks (per physician).
- WBAT with crutches 2-4 weeks.

#### ROM:

- 0-2 weeks, prone PROM 0-90°.
- 2-6 weeks PROM to tolerance prone or supine.
- Begin biking at 3 weeks.

### Exercises:

- Quad isometrics. Electric stim if significant shut down.
- Patellar MOBS.
- Multi-angle quad. Isometrics.
- SL hip abd, clamshells.

- Gastric stretch, ankle pumps.
- Minisquats 0-45° (week 3-4).
- Weight shifts (week 2-3)

## Phase II (4-8 weeks)

#### Goals:

- 1. PCL ligament protection.
- 2. Full ROM.
- 3. Normal gait.
- 4. Glut activation.
- Brace use for 12 weeks.
- Discontinue crutch use with normal gait.
- Limit double leg squats/strengthening to 70°.

#### ROM:

• Unrestricted AROM.

## Exercises:

- Single leg strengthening 0°-50°-70°
- Double leg strengthening 0°-50°-70° (leg press/hip sled)
- Static lunge 0°-45°.
- Lunge wall sit (feet in line with knees at end of squat); progress to short wall sit (feet behind knees at the end of the squat).
- Double leg bridge on ball with knees extended.
- Single leg deadlift with knees extended.
- Step ups.
- Balance drills.

## Phase III (8-12 weeks)

#### Goals:

- 1. Progress CKC strengthening to beyond 70° of knee flexion.
- 2. Initiate running program (12 weeks post) if quad girth 90% of contralateral thigh.
- 3. Discontinue PCL brace at 12 weeks.

4. Isolated hamstring strengthening may begin 0-55° at 12 weeks after injury.

## Exercises:

- Continue to add resistance to leg press/hip sled.
- Continue to add resistance to single leg activities.
- Squat and lunge progression.
- Proprioception and balance progression.
- Functional drills for return to sports/work.