

COMBINED POSTERIOR CRUCIATE LIGAMENT (PCL) AND POSTEROLATERAL CORNER (PLC) RECONSTRUCTION PHYSICAL THERAPY PROTOCOL

Recommend 2-3x/week for 8 weeks
Please contact office for renewal as needed

Days 0-7 (PT 1x/week)	<ul style="list-style-type: none"> • Brace locked in full extension at all times (sleeping, etc.) • TTWB with crutches with brace locked in full extension • Begin quad sets, SLRs, ankle pumps
Weeks 1-4 (PT 1x/week)	<ul style="list-style-type: none"> • Toe touch weight bearing with brace locked in full extension while ambulating • Pillow behind proximal tibia at rest to prevent posterior tibial sag • Supine PROM (0-60°) in brace by Physical Therapist – maintain anterior force on proximal tibia to prevent posterior tibial sag • Hamstring/calf stretching, standing hip extension exercises
Weeks 5-8 (PT 2-3x/week)	<ul style="list-style-type: none"> • Progress to WBAT over weeks 5-6 with brace 0-90° then unlocked as tolerated • d/c brace at 6-8 weeks post-op; d/c crutches/brace when no quad lag with SLR • Wall slides 0-45° - begin isometric then progress to active against body weight • Standing hip extension/flexion/abduction/adduction with resistance (resistance must be proximal to knee)
Weeks 9-12 (PT 2-3x/week)	<ul style="list-style-type: none"> • Stationary bike with seat higher than normal to minimize hamstring activity • Closed chain terminal knee extension initially with theraband then progress to weights • Balance/proprioception training; single leg stance exercises • Leg press 0-90°
Months 3-6 (PT 2x/month)	<ul style="list-style-type: none"> • Advance closed chain exercise program • Treadmill walking to jog progression • Progress proprioception and balance activities
Months 6+	<ul style="list-style-type: none"> • Begin sports-specific exercises with gradual return to sporting activities • Maintain strength, endurance, and flexibility