

POSTERIOR CRUCIATE LIGAMENT (PCL) RECONSTRUCTION PHYSICAL THERAPY PROTOCOL

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

Days 0-7	 Brace locked in full extension at all times (sleeping, etc.)
(PT 1x/week)	 Non-weight bearing on leg
	 Begin quad sets, SLRs, hip abduction/adduction, ankle pumps
Weeks 1-4	 Non-weight bearing with brace locked in full extension while ambulating
(PT 1x/week)	 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
	 Calf press with theraband progressing to bilateral standing calf raises with
	full knee extension, progress to single calf raise
Weeks 5-8	 Progress to WBAT over 2-4 weeks with brace 0-90° then unlocked as
(PT 2-3x/week)	tolerated
	 d/c crutches/brace when no quad lag with SLR, gait pattern normalized
	 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	• Stationary bike with seat higher than normal to minimize hamstring activity
(PT 2-3x/week)	 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	 Advance closed chain exercise program
(PT 2x/month)	 Treadmill walking to jog progression
	 Progress proprioception and balance activities
Months 6+	 Begin sports-specific exercises with gradual return to sporting activities
	 Maintain strength, endurance, and flexibility