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Post-Operative Protocol- Quadriceps/Patellar Tendon Repair

Patient Name: _____ Date: _____

Diagnosis: _____ Date of Surgery: _____

____ Provide patient with home exercise program

0-6 Weeks:

WBAT, Brace locked in extension all times except with therapy.
ROM: 0-30° Weeks 0-2
0-60° Weeks 2-4
0-90° Weeks 4-6
Patella mobilization
SLR supine with brace locked at 0 degrees, Quad Sets
Ankle Pumps

6-12 Weeks:

Unlock brace for ambulating. Wean from brace as tolerated.
May D/C crutches when gait normalized.
Normalize ROM. No limits.
Begin short crank ergometry and progress to
Standard (170 mm) ergometry (if knee ROM > 115 degrees)
Advance quad strengthening
Mini Squats / Weight Shift

3-6 Months:

Normal gait, WBAT with no assist
Full, Normal ROM
Leg Press, Squats
Initiate running/jogging
Isotonic Knee Extensions (90-40 degrees, closed chain preferred)
Agility exercises (sport cord)
Versa climber/Nordic Track
Normalize quad strength

____ Other:

Modalities: _____ Electric Stimulation _____ Ultrasound _____ Heat before/Ice after

Frequency: _____ x/ week x _____ weeks

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