## QUADS / PATELLA TENDON REPAIR REHABILTATION – patient information



This rehabilitation programme provides a guide to the likely sequence of progress. The way that we heal and outcomes from surgery and tissue quality can vary from person to person. Precautions and progressions may be altered by the surgeon or physiotherapist these factors.

| Time                 | Mobility   | Rehab  | Criteria for progression/milestones   |
|----------------------|--|--|---|
| Week 1-2<br>Phase 1  | <ul> <li>Weight bearing as tolerated with elbow crutches</li> <li>Brace locked straight (in extension) for walking</li> </ul>                    | <ul> <li>Discharged from ward once safely mobile in brace with elbow crutches (or frame)</li> <li>Physiotherapy to teach exercises with brace opened (brace to remain in situ at all other times)</li> </ul>   | <ul> <li>Discharged from ward once good pain control and safely mobile</li> <li>Progress to Phase 2 &gt;14days post operation</li> </ul>        |
| Week 3-6<br>Phase 2  | <ul> <li>Brace locked in full extension</li> <li>Discontinue with elbow crutches as per surgeon/physiotherapy advice (from 2/52+)</li> </ul>     | <ul> <li>Initial outpatient physio appointment</li> <li>Continue with brace, unless for exercise</li> <li>Gradual increase exercises and knee bend (flexion) under supervision of physiotherapy</li> </ul>   | <ul> <li>Knee Range of Movement (ROM)         0-90°</li> <li>Walking unaided (normal gait)</li> </ul>   |
| 6 week rev           | iew in orthopaedic clinic. Brac  | e can be adjusted by orthopaedic or physiotherapy, incremen  | tally to 90 <sup>0</sup> till >12weeks  |
| 7-12weeks<br>Phase 3 | <ul> <li>Full weight bearing</li> <li>Hinged brace opened</li> <li>Based on passive ROM incrementally increased in brace to allow 90°</li> </ul> | <ul> <li>Increase knee flexion to 115° in week 7/8</li> <li>Increase knee flexion to 130° in week 9/10 and also start active knee extension and exercise bike</li> <li>Limit weight bearing flexion to 90° till &gt;12 weeks e.g. squats</li> <li>Single leg balance exercise</li> </ul> | <ul> <li>Knee ROM 0-110+<sup>0</sup></li> <li>SLR (no lag)</li> </ul>   |
| 12/52 revie          | w in orthopaedic clinic. Remo  | ve brace and sign off by orthopaedic as appropriate.   |   |
| 12week+<br>Phase 4   | Full weight bearing on all surfaces without brace  | <ul> <li>Specific stretches (aim for full ROM)</li> <li>Squat, lunge, step work</li> <li>Exercise bike, stepper, swimming</li> <li>Progress hip/core strengthening</li> <li>Avoid impact and forceful eccentric contractions</li> </ul>  | <ul> <li>Knee ROM 0-130<sup>0</sup></li> <li>Single leg stand &gt;10secs</li> </ul>   |
| 16week+<br>Phase 5   | Able to start jogging as required  | <ul> <li>Progress bilateral to unilateral exercise e.g. single leg squat</li> <li>Increase resistance/speed exercise</li> <li>Commence jogging (if normal gait)</li> <li>Sport/work specific drills</li> </ul>   | <ul> <li>No post activity swelling. Post exercise soreness should resolve &lt;24hrs</li> <li>Patient understands graded progressions</li> </ul> |

This information is available in audio, Braille, large print and other languages. To request a copy, please ask as member of staff. Reprinted December 2019 Review December 2021 Ref: SC/ORTHO/0171219