Quad Tendon Repair Protocol

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A. 0-4 weeks post-op
   1. Gait: WBAT, using 2 crutches and knee immobilizer or locked IROM
   2. Brace: IROM locked at 0°, worn at night and when up and busy
   3. ROM restrictions: 0-30° with goal of 0-90 by 4 weeks postop.
   4. Frequent cryotherapy and modalities as indicated
   5. Exercise
      a. ROM work within guidelines. A-AA flexion, passive extension format
      b. Gentle Q-sets
      c. Patellar Mobs, Scar massage
      d. Ankle pumps, seated gastroc and HS stretches

B. 4-6 weeks p/o
   1. Gait: Continue use of IROM, wean from AD pending quad control criteria (**6 weeks**)
   2. Brace: Open 10° less than active flexion measurement. Nocturnal and when up and busy
   3. ROM restrictions: Progressive now, Goal is to have full ROM by 6 weeks p/o. May use gentle PROM techniques
   4. Continues cryotherapy and modalities as indicated
   5. Exercise
      a. ROM within guidelines
      b. Light duty OKC, CKC exercise
      c. Light duty balance/proprioceptive work
      d. Progressive hip/core work
      e. Progressive non-impact cardio

C. 6 weeks p/o
   1. Gait: Wean AD per standard criteria ROM:
   2. Brace: DC when good quad control
   3. ROM restrictions: Full ROM work
   4. Continues cryotherapy and modalities as indicated
   5. Exercise
      a. Progressive OKC, CKC work
      b. Progressive Balance/proprioceptive work
      c. Progressive hip/core work
      d. Progressive non-impact cardio work

D. 12 weeks p/o
   1. Interval jog to run programs
   2. Light but progressive agilities
   3. Light but progressive plyometrics and jump to hop drills
   4. Continue all progressive strength and cardio work