

PCL Injury: Non-Operative

This program may be accelerated or extended depending on the severity of injury and magnitude of symptoms. An increase in pain, swelling, or loss of ROM suggests that progression of the program may be too fast.

PHASE I (WEEKS 0-3)

MAXIMAL PROTECTION PHASE

GOALS:

- Decrease pain and inflammation
- Early protected ROM
- Prevent quadriceps atrophy
- Patient education

PRECAUTIONS:

- Crutches (PRN): WBAT
- Hinge knee brace:
 - Week 1: 0-60°
 - Week 2: 0-90°
 - Week 3: 0-115°
- Avoid active knee flexion

TREATMENT RECOMMENDATIONS:

- Range of Motion: limits as above
- Strengthening: Emphasize quads (SLR, knee extensions 0-60°, mini-squats 0-50°, leg press 30-90°)
- Bicycle beginning week 2
- Modalities: PRN
- HEP

MINIMUM CRITERIA FOR ADVANCEMENT:

- No increased instability
- No increased swelling
- Minimal tenderness
- PROM at least 0-115°

PHASE II (WEEKS 4-6)

MODERATE PROTECTION PHASE

GOALS:

- ROM 0-125°
- Discontinue brace

PRECAUTIONS:

- Avoid active knee flexion

TREATMENT RECOMMENDATIONS:

- ROM 0-125°
- Continue and advance strengthening.
- Proprioception training
- Endurance work
- Pool running/Alter-G progress to full
- Progress to agility drills when appropriate
- HEP

MINIMUM CRITERIA FOR ADVANCEMENT:

- No instability
- No swelling
- Full painless ROM

PHASE III (WEEKS 7-12)

MINIMAL PROTECTION PHASE

GOALS:

- Full strength and ROM
- Gradual increase to full activity level

PRECAUTIONS:

- None

TREATMENT RECOMMENDATIONS:

- Continue flexibility, strengthening, proprioception training
- Initiate sport/activity specific activity drills
- Gradual return to sport/activities
- HEP for maintenance

MINIMUM CRITERIA FOR ADVANCEMENT:

- Full ROM
- No effusion
- No change in laxity
- Isokinetic strength >85% contralateral side
- Satisfactory proprioception