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## **REHABILITATION GUIDELINES FOR ISOLATED MCL TEAR**

### Stage 1(Day 1-3):

ROM: hinged splint locked at 0 degrees, patellar mobilization. Knee brace with full range of motion as tolerated.

Strength: quad sets and SLR (without weights), isometric hamstrings, ankle pumping

Weight bearing: as tolerated

Modalities: EMG biofeedback to hamstrings and quadriceps prn; EMS prn; cryotherapy

Sports: none.

### Stage 2(Day 4-6 weeks):

ROM: Hinged knee brace to control ROM in comfortable range, active ROM in brace within the comfortable range, increase ROM weekly to full range of motion as tolerated.

Strength: quad and hamstring isometrics at mid-point of comfortable range, stationary bicycling and/or other cardiovascular conditioning when the patient is comfortable, PRE for non-involved body areas. Closed chain strength with protection of valgus strain.

Weightbearing: WBAT

Modalities: as above

Sports: none.

### Stage 3(6 weeks and beyond):

ROM: as above; discontinue brace and progress to functional MCL brace, as necessary.

Strengthening: as above

Weight bearing: full

Modalities: prn

Sports: progress through graduated running program such as “functional rehabilitation program”

Resume main sports if patient has obtained near full ROM and has obtained at least 70-80% of quad and hamstring strength as compared to the other extremity(using Cybex isokinetic testing or other isokinetic testing).