



212 East Central Ave., Suite 365
Spokane, Washington 99208

Phone: (509) 435-0973
Fax: (509) 435-0978
AlpineOrthoSpine.com

REHABILITATION GUIDELINES FOR DISTAL PATELLOFEMORAL REALIGNMENT

Most proximal realignment procedures are not necessarily performed with a concomitant distal realignment. However, the limiting procedure for physical therapy for patellofemoral realignment is whether distal realignment is performed or not. Therefore, if distal realignment has been performed even with a concomitant proximal realignment, then please refer to the distal realignment guidelines below.

Stage 1(Day 1-4 weeks):

ROM: hinged knee splint locked at 0 degrees; intermittent active and active assisted flexion with passive extension for 5-10 minutes QID; patellar mobilization; stay within 0-90 degrees ROM; may take brace off for physical therapy and gentle range of motion.

Strength: isometric hamstrings utilizing an endurance program of 10-40 repetitions per set with 5 sets per day

Weight bearing: 25% brace locked in full extension

Modalities: EMG biofeedback to hamstrings (not quadriceps) prn; EMS to hamstrings(not quadriceps) prn; cryotherapy

Sports: none.

Stage 2(4 weeks-8 weeks):

ROM: advance ROM as tolerated; brace locked in full extension when ambulating; may otherwise take brace off for physical therapy and gentle range of motion.

Strength: light quadricep PREs as pain/swelling allows [*starting 6 weeks post-op*]

Weightbearing: 25%; 6th week-50%; 7th week-75%; 8th week-100% with brace locked in full extension

Modalities: prn-as above

Sports: none.

Stage 3(8 weeks-12 weeks):

ROM: increase as tolerated; finish knee brace by 10-12th week postoperative.

Strength: progress with “Nonoperative patellofemoral program”

Weightbearing: full

Modalities: as above.

Sports: none

Stage 4(3 months and beyond):

ROM: as tolerated; knee brace off

Strength: “Nonoperative patellofemoral program”

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 80% of quad
and hamstring strength as compared to the other extremity. Usually back to full sports by 6
months. Progress through work hardening, if applicable.

(Copyright Miguel A. Schmitz, MD, PC, March 2003)