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.

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