



# PCL RECONSTRUCTION

## Phase 1 – Immediately post-operatively to week 4

Brace: 0–1 week: post-op brace locked in full extension at all times

At 1 week p/o, brace is unlocked for passive ROM performed by physical therapy

Technique for passive ROM is as follow:

Patient supine; therapist maintains anterior pressure on proximal tibia as knee is flexed.

For patients with combined PCL/ACL reconstructions, the above technique is modified such

That a neutral position of the proximal tibia is maintained as the knee is flexed.

It is important to prevent posterior sagging at all times

Weight-bearing status:

Weight-bearing status as tolerated with crutches, brace locked in extension

Position pillow under proximal posterior tibia at rest to prevent posterior tibial sag

Therapeutic exercises:

Patellar mobilization

Quadriceps sets

Straight leg raise

Hip abduction and adduction

Ankle pumps

Hamstring and calf stretching

Calf press with exercise bands, progressing to standing calf raise with full knee extension

Standing hip extension from neutral

Functional electrical stimulation as needed

## Phase 2 – Post operative weeks 4–12

Criteria for progression to Phase II

Good quadriceps control

Approximately 60 degrees knee flexion

Full knee extension

No signs of active inflammation

Brace: 4–6 weeks/brace unlocked for gait in controlled environment only

6–8 weeks/brace unlocked for all activities

8 weeks/brace discontinued, as allowed by surgeon

Weight-bearing status

4–8 weeks: WBAT with crutches

8 weeks, may discontinue crutches if patient demonstrates

No quadriceps lag with SLR



Full knee extension  
Knee flexion 90-100 degrees  
Normal gait pattern  
If PCL or LCL repair, continue crutches for 12 weeks

Therapeutic Exercises:

4–8 weeks:

Wall slides/mini-squats 0-45 degrees  
Leg press 0-60 degrees  
Standing 4-way hip exercise for flexion, extension, abduction, adduction  
Ambulation in pool

8–12 weeks

Stationary bike  
Closed kinetic chain terminal knee extension using resisted band or weight machine  
Stairmaster  
Elliptical trainer  
Balance and proprioception exercises  
Seated calf raises  
Leg press 0-90 degrees

### **Phase 3 – Post-operative months 3–9**

Therapeutic Exercises

Continue closed kinetic chain exercise progression  
Treadmill walking  
Jogging in pool with wet vest or belt  
Swimming (no breaststroke or frog kick)

### **Phase 4 – Post-operative Month 9 until return to full activity**

Therapeutic exercises:

Continue closed kinetic chain exercise progression  
Cross-country ski machine  
Sport-specific functional progression, which may include but is not limited to:  
Slide board  
Jog/Run progression  
Figure 8, carioca, backward running, cutting  
Jumping

Work hardening program as indicated by physical therapist and/or surgeon recommendation. Patient will need a referral from surgeon to begin work hardening.

