



## Acute Patella Dislocation Rehab Protocol

### Phase 1

#### **Goals:**

- Decrease pain and swelling
- Limit range of motion and weightbearing to protect healing tissues
- Return muscle function
- Avoid overaggressive therapy that may lead the patient into a patellofemoral pain syndrome

#### **Brace:**

- Set at 0 degrees initially with ambulation
- Progress to 0-30 degrees for weeks 1-2
- Progress to 0-60 degrees for weeks 2-3
- Progress to 0-90 degrees for weeks 3-4
- Patellofemoral brace from weeks 4-6

#### **Intervention:**

- Ice
- McConnell taping; light compressive bandage
- Instruction in partial weightbearing with crutches
- Electrical stimulation for activation of the VMO
- Supine straight leg raise (SLR) with minimal to no pain
- Ankle pumps if edema is present
- Isometric hamstring

#### **Criteria for Phase 2:**

- No significant joint effusion, no quadriceps extension lag, minimal to no pain with activities of daily living

### Phase 2

#### **Goals:**

- Full ROM – pain free
- Improve quadriceps strength
- Low-level functional activities
- Initiate conditioning
- Avoid patellofemoral symptoms or instability

***Intervention:***

- Continue patellar bracing or taping
- Weightbearing as tolerated; discard crutches when extension lag is no longer present
- Continue electrical stimulation and modalities as needed
- Continue supine SLR and add adduction and abduction SLRs
- Toe raises with equal weight bearing
- Closed kinetic chain exercises
- Low-level endurance and pool exercises

***Criteria for Phase 3:***

- Full active ROM, good to normal quadriceps strength, full weightbearing with normal gait pattern

## **Phase 3**

***Goals:***

- Improve function
- Gradual return to high-level activities

***Intervention:***

- Bracing: wean from bracing and taping as quadriceps function improves
- Four-way hip exercises
- Pool therapy – walking with progression to running
- Sport and skill – specific training
- Proprioceptive training
- Patient education

***Criteria for Return to Full Activity (8-12 weeks):***

- Equal ROM between lower extremities
- No pain or edema
- 85% strength compare with uninvolved limb
- Satisfactory 1-minute single leg hop test, two-legged hop test
- Patellar stability with clinical tests