

Rehabilitation Protocol: Patellofemoral Joint Replacement (PFJR)

Date of Surgery: _____

Concomitant: ☐ MPFL Reconstruction – brace locked in extension for ambulation and sleep for 6 weeks

WBAT unless otherwise specified. Avoid active knee extension (short/long arc quads) for 6 weeks. No pillow under the knee. Please contact our office with any questions or concerns.

☐ **Phase I (Weeks 1–6)**

- **Weightbearing:** WBAT with assistive device; avoid premature discharge if gait deviations present
- **Brace:** Locked in extension as needed for stability (MPFL: locked for 6 weeks)
- **Precautions:** No active knee extension (SAQ/LAQ); avoid prolonged sitting and walking; delay reciprocal stairs
- **Range of Motion** – PROM/AAROM extension (heel props); flexion off edge of table; bike short to standard crank as ROM allows
- **Therapeutic Exercises**
 - Quad sets with NMES/biofeedback; SLR all planes (prioritize flexion without lag); consider BFR
 - Bilateral leg press, then eccentric, then single leg; sit to stand from higher to lower seat
 - Forward step-ups from 2–4"; balance double to single leg (soft knee)
 - Patellar and soft tissue mobilization; calf/hamstring stretching; cryotherapy
- **Criteria to Progress:** Flexion >110°, extension 0°; 10-second quad contraction, SLR without lag; normal gait; symmetric sit to stand; active extension to 0° at 6 weeks

☐ **Phase II (Weeks 7–16)**

- **Precautions:** No high impact (running, jumping, plyometrics); avoid too much too soon
- **Therapeutic Exercises**
 - Leg press (bilateral, eccentric, single leg); body weight squats; proximal and core
 - Step-ups and step-downs 2" to 8"; balance static to dynamic
 - Retro/forward treadmill, elliptical, bike; aquatics once healed; floor transfers
 - Low-impact agility at end of phase
- **Criteria for Discharge:** Flexion >125°, extension 0°; symmetric squat; reciprocal stairs; LE strength 4+/5; independent HEP

☐ **Phase III – Return to Recreation (Weeks 17–24+, if applicable)**

- **Return to Activity:** Low-impact sport and recreation with physician clearance; avoid high impact