

Table 5: Rehabilitation Program Following Surgical Reconstruction of the PCL

Week/Month	Rehabilitation Protocol
Weeks 1 to 6	<ul style="list-style-type: none"> • Long leg knee brace locked in full extension with no weight bearing for the first 6 weeks • Patellar mobilization • Begin range-of-motion exercises 0° to 70° • Quadriceps sets with or without electrical stimulation to the quadriceps • Hamstring stretching
Weeks 7 to 12	<ul style="list-style-type: none"> • Advance range-of-motion exercises to 90° by week 9 and to 120° by week 12 • Advance weight bearing to 25% of body weight, increasing 25% each week until full weight bearing is achieved • Continue hamstring stretching • Open-chain quadriceps strengthening begins • Stationary biking for increased range of motion • Closed-chain strengthening once full weight bearing has been achieved • Balance and proprioceptive training are begun
Months 4 to 12	<ul style="list-style-type: none"> • Discontinue hinged brace • Full range-of-motion exercises are encouraged • Begin active flexion exercises against gravity, with resistive exercises beginning at the end of the fourth month • Begin straight-line jogging once the affected leg has 70% of the functional strength of the uninvolved extremity, as assessed by a single-leg hop test • Sport-specific training may begin in a functional PCL brace once hamstring and quadriceps deficits are 20% or less
Months 7 to 12	<ul style="list-style-type: none"> • Patients may return to athletic activity or heavy labor at the end of the sixth month if: <ul style="list-style-type: none"> ○ Minimal or no pain or swelling ○ Strength and functional tests are within 90% of the contralateral side ○ Grade I laxity ○ PCL functional brace is worn • At 1 year, patient is given the option to discontinue the brace if laxity is grade I or less