



Knee Arthroscopy with Lateral Release

Matthew Varacallo MD

Phase I - Maximum Protection (0 to 2 weeks):

Weeks 0 to 2:

- > Lateral buttress in post-op dressing to stabilize patella
- Ice and modalities to reduce pain and inflammation
- Use crutches for 5 to 7 days to reduce swelling. The patient may discontinue the crutches when they can walk without pain and without limping.
- Elevate the knee above the heart for the first 3 to 5 days
- > Initiate patella mobility exercises in all planes, emphasis on lateral tilt
- Begin full passive/active knee range of motion
- Quadriceps setting
- > Multi-plane open chain straight leg raising
- Gait training

Phase II - Progressive Stretching and Early Strengthening (2 to 6 weeks):

Weeks 2 to 6:

- Maintain program as per week 0 to 2
- Continue with patella mobility exercises
- > Continue with modalities to help control inflammation
- Initiate global lower extremity stretching
- Begin stationary bike, treadmill, and/or elliptical trainer as strength and swelling allow, avoiding impact activity
- > Begin bilateral closed kinetic chain strengthening progressing to unilateral as tolerated
- Promote normal arthrokinematics with all closed chain exercises
- > Implement reintegration exercises emphasizing core stability
- Begin closed chain multi-plane hip strengthening
- Manual lower extremity PNF patterns
- > Proprioceptive drills emphasizing neuromuscular control

Phase III – Advanced Strengthening and Proprioception Phase (6 to 10 weeks):

Weeks 6 to 10:

- Modalities as needed
- Continue with phase II exercises as indicated
- Advance time and intensity on cardiovascular program no running
- > Begin functional cord resistance program
- Initiate gym strengthening- bilateral progressing to unilateral as tolerated Leg press, squats, lunges (protected range) hamstring curls, ab/adduction, calf raises
- Begin pool running program at weeks 8 to 10



Phase IV – Advanced Strengthening and Early Plyometric Drills (10-12 weeks):

Weeks10 to12:

- Begin running program at week 10 to 12, this is based on quadriceps function, strength, swelling, and endurance
- > Begin light bilateral plyometric drills

Phase V – Return to Sport Functional Program (weeks 12 to 16):

Weeks 12 to 16:

- Follow-up examination with physician
- Implement sport specific multi-directional drills
- > Continue with aggressive lower extremity strengthening, cardiovascular training, and flexibility
- Progress plyometric exercises to unilateral as tolerated
- Sports test for return to sport

Matthew A. Varacallo MD Penn Highlands Healthcare – Orthopaedic Surgery & Sports Medicine 145 Hospital Avenue, Suite 301 DuBois, PA 15857 O: 814-375-6200 F: 814-375-6452