
Medial Patella Femoral Ligament Reconstruction (MPFL)

Name of Protocol/Regime	Consultant	Updated On	Updated By	Review Date
Medial Patella Femoral Ligament	Mr Nita	July 2018	Karen Armstrong	July 2020

Please note that surgeons may have different post op instructions which must be adhered to

Inpatients

Post-op 0-2 weeks

- WB as tolerated with EC's
- Circulatory (foot pump exs)
- Static Quads
- SLR if no lag
- Hip abduction in SL
- Active & act/assisted flexion/extension (0-90) encouraged using ortho glide
- Patella mobs (medial)
- Cryotherapy-intermittently

On-Discharge

- Photocopy op. notes to attach to referral.
- Plan for D/C, refer to outpatients and complete D/C summary.
- Refer to OT for ADL's as required.
- Ensure that the Patient has the initial exercise sheet as required.

Outpatients – Operation notes must be attached

Avoid any twisting action at the knee until 8-12 weeks post op

2 – 6 weeks

Goals

- Eliminate any swelling
- Educate patients
- Protect Soft tissue Healing
- AROM to tolerance
- Quads strengthening (Especially VMO)
- Progress gait from 2 crutches

Therapy Guidelines

- Hydrotherapy referral
- Active & passive knee flexion to tolerance
- Hip abduction with resistance
- Calf raises & Heel drops
- Resisted hamstrings
- Core stability exercises on swiss ball
- Bike –if ROM & swelling permits
- Double wall slides
- Hams/Quad Bench – If pain free
- Balance exercises
- Proprioceptive training-single leg exercises
- Gait-Maintain correct gait pattern
- Clams

6-8 weeks

Goals

- Eliminate any joint swelling
- Full non painful ROM
- Independent gait
- Improve muscle strength and control without exacerbation of symptoms

Therapy Guidelines

- ?mobs to PFJ & Tib Fem Joint - especially if flexion below 90
- Swiss ball work for Hip & Core stability
- Rower
- Treadmill
- Stepper with resistance
- Resistance bike
- Progress proprioceptive work to advanced stages

8-12 weeks

Goals

- Return to sport gradually (Only if Single leg dynamic control is adequate)

Therapy Guidelines

- Lunges
- Trampoline with jump

- Running

12+ weeks

Goals

- Full pain free AROM
- 5 /5 Strength

Therapy Guidelines

- Functional Sporting Activity

Return to functional activities

Returning to work: Phased return may be advised initially from 6 weeks

Driving: From 2 weeks if good control

Contact sports: After 6 - 9 months

Swimming: - From 6 weeks (Stroke dependent)

Non- Contact sports: After 3-6 Months

All of the above is to act as a guide only, clinical reasoning should be used throughout as each patient is different.