

phil h. berry, jr., m.d.
miguel a. hernandez, III, m.d.
ray f. aronowitz, m.d.
david a. heck, m.d.
zachary kelley, m.d.
alexander cho, m.d.
jason k. lowry, md
jon e. nathanson, d.p.m.



810 north zang blvd.
dallas, tx 75208-4233
telephone (214) 941-4243
fax (214) 941-1153

www.TheBoneDocs.com
www.jasonlowrymd.com

2800 east broad st, suite 510
mansfield, tx 76063
telephone (817) 453-3500
fax (817) 453-3820

ANTERIOR KNEE PAIN REHAB PROTOCOL

Introduction

- This rehab protocol is intended for patients with anterior knee pain, patellar tilt, patellar subluxation, or patellofemoral chondromalacia.
- Goal: Minimize stress on the patellofemoral articulation, especially lateral patellofemoral articulation, while strengthening and stretching leg to allow return to full activity.

Phase I (0 to 2 weeks)

- Fit a patella-stabilizing brace.
- Modalities to decrease swelling, pain, and inflammation.
- Begin 4-way SLR, short arc quad (0 to 30 degrees), HS strengthening exercises.
- Begin stretching for quadriceps, hamstrings, gastrocnemius/soleus, ITB, as well as hip flexors.
- Patellar mobilizations – lateral glide, lateral tilt.
- Avoid aggravating activities:
 - Prolonged or deep squats.
 - Excessive stairs.
 - Pressure directly on knees (i.e. – carpet layers, scrubbing floors)
 - Weighted full arc knee extensions.

Phase II (3 to 6 weeks)

- Continue with brace, modalities, strengthening and flexibility.
- Begin closed chain exercises (i.e. partial lunges, mini-squats, wall slides).

Phase III (6 to 12 weeks)

- Continue as in phase II.
- Begin aerobic conditioning (i.e. bicycling with seat elevated, stair-stepper, walking, etc). Progressively increase duration of aerobic conditioning.

- Progressively increase weight for closed chain exercises.

Phase IV (after 12 weeks)

- Return to running, jumping, cutting sports.
- Brace wear only for sports participation, as needed.
- Emphasize life-time maintenance

A handwritten signature in purple ink, appearing to read 'J. K. Lowry, MD', with a stylized flourish at the end.

Jason K. Lowry, MD