UofL Health Sports Medicine
Official Health Care Provider of the Louisville Cardinals

Jarod A. Richards, MD
Orthopaedic Surgeon
Sports Medicine, Arthroscopy, Joint Preservation
jarodrichardsMD.com
502.955.3312 (p)

Department of Orthopaedic Surgery
University of Louisville

Procedure: Patellar Tendon Repair and/or Reconstruction

Description of Procedure: Repair and/ or reconstruction of patellar tendon tissue using high tensile suture, anchors, and/or adjustable loop fixation with suspensory suture buttons.

PT Frequency: 3-4x wkly 0-3 mo, physician/therapist discretion afterwards. Home exercises daily.

	Weight Bearing	Brace	ROM	Therapeutic Exercises
Phase I: 0-4 wks	Weight bearing as tolerated (WBAT) with brace locked in extension.	Locked in full extension for ambulation and sleeping (remove for PT). Dressing: PT may perform dressing change as needed. Leave steri-strips in place. Ok to shower with or without dressing. No tub bathing/ soaking until wound fully healed.	0-2 wks: 0-45° passive/ active hamstring-assist with PT. Progress motion 15° weekly thereafter. **Goal of full extension by 2 wks and minimum 60° flexion by 4 wks.	Heel slides, Quad Sets Modalities PRN per therapist including electrical stimulation, ultrasound, heat (before), ice (after).
Phase II: 4-12 wks	**4-8 wks:** WBAT in brace. No WB >90° **8-12 wks:** WBAT	**4-8 wks:** Brace with limits changed wkly **8-12 wks:** Wean out of brace	**4-8 wks:** Progress 15° wkly **8-12 wks:** Full	**4-8 wks:** Begin weight bearing calf raises (week 4) **8-12 wks:** Progress to closed chain activities, Begin hamstring work, lunges/leg press 0-90°, proprioception exercises, balance/core/hip/glutes

Continued on Back

	Weight Bearing	Brace	ROM	Therapeutic Exercises
				Begin stationary bike (week 10)
Phase III: 12 wks onward	WBAT	None	Full	Progress exercises, single leg balance, core, glutes, eccentric hamstrings, elliptical, and bike Swimming (week 12) Advance to sport-specific drills and running/jumping (week 20 plus)

Typical follow up frequency is 2 wks with mid-level then with Dr. Richards at 4-6 wks, 3 mo, 6 mo, 9 mo, 1 yr, 2 yr, and 5 yr. Long term follow up is kindly requested for data collection. Frequency is subject to change pending patient progress. Progression back to sport is dependent on case-by-case basis and determined by Dr. Richards. If significant pain or swelling occurs, patient is expected to stop causative activity and follow up with our office. On call providers are always available.