Baylor Scott & White
ORTHOPEDIC ASSOCIATES OF DALLAS
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Quadriceps Tendon Reconstruction

REHABILITATION PROTOCOL

PHASE	RANGE OF MOTION	BRACE / WEIGHT BEARING	THERAPEUTIC EXERCISE
Phase I **0–4 weeks** GOAL TO ADVANCE *Full passive extension; quad activation*	Passive flexion 0-30° for 2 weeks, then to 60° by 4 weeks. NO active knee straightening*	Weight bearing as tolerated with brace locked straight at all times; crutches	Quad sets, glute sets, calf raises, ankle pumps, hip strengthening
Phase II **4–8 weeks** GOAL TO ADVANCE *Flexion 90°; full weight bearing in brace*	Increase passive flexion about 10° per week to 90° by 8 weeks	Brace locked for walking and sleep; may unlock for sitting within limit	Straight-leg raises (only without lag), bridges, core and hip work
Phase III **8–16 weeks** GOAL TO ADVANCE *Flexion ≥120°; normal gait and stairs*	Progress no faster than 10° per week before 12 weeks	Unlock brace 0-60° for walking at 8 weeks with good quad control; discontinue at 10-12 weeks	Gradual closed-chain strengthening, bike once motion allows, single-leg balance. No maximal quad effort before 16-20 weeks
Phase IV **4–9 months** GOAL TO ADVANCE *Quad strength ≥80-90% of other side*	Full	Full	Return-to-run program at about 6 months when strength ≥80%; double → single-leg plyometrics
Phase V **9–12 months** GOAL TO ADVANCE *Return-to-sport testing passed*	Full without discomfort	—	Agility, cutting and sport-specific training; return to sport at about 9-12 months**

NOTES

*A reconstructed tendon heals more slowly than a repair; bending is gained gradually to avoid stretching the graft

**If approved by physician

This protocol is a guideline. Your surgeon may adjust it based on your surgery and progress.
Call the office for fever, wound drainage, calf pain or swelling, or new numbness or tingling.

Questions: 469.800.7200
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