ACL REHAB FUNCTIONAL TESTING

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At 12 Weeks Post op:

Goal: Reveal the remaining gross strength deficits to encourage continued independence in a gym/home program for core, hip, and knee strength. Determine if they can initiate a return to running program.

1. Measure Quad girth at 6 inches above the patella

2. Isokinetic testing OR Isometric Quad and HS strength with electronic dynamometer OR knee extension and flexion one-repetition maximum as determined by the formula:Weight x [36÷(37-#reps)]. Compare to contralateral leg. Surgical leg Must be >75% of contralateral leg.

At 16 Weeks Post-op and 5 months post-op:

Goal: Help the patient see their current gross strength and functional deficits in order to fine tune their rehab to address deficits in core, hip and knee strength. Motivate and set expectations for return to sports.

1. Measure Quad girth at 6 inches above the patella

2. Single leg hop tests: Monitor for quality and quantity vs. contralateral side (should be 90%)
   - Single leg hop for distance
   - Triple hop for distance
   - Single leg triple cross-over hop for distance
   - Single leg 6 meter hop for time

3. Isokinetic testing *OR* Isometric Quad and HS strength with electronic dynamometer *OR* knee extension and flexion one-repetition maximum as determined by the formula:
   Weight x [36÷(37- #reps)]. Compare to contralateral leg. (Surgical leg should be >90% of contralateral leg)

Prior to Return to Sports:

Goal: Determine readiness to return to Sports. **Each month delayed after 6 months post-op may decrease the risk of re-tear by approximately 50%. **

1. ACL-RSI self report questionnaire (score >75), or similar self reporting scale

2. Single leg hop tests as above: Monitor for quality and quantity vs. contralateral side (should be 95-100%)

3. Isokinetic testing *OR* Isometric Quad and HS strength with electronic dynamometer *OR* knee extension and flexion one-repetition maximum as determined by the formula:
   Weight x [36÷(37- #reps)]. Compare to contralateral leg. (Surgical leg should be >95% of contralateral leg)