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Knee Nonoperative Protocol

Diagnosis: Knee Pain

Physician Goals: pain relief, increased function, activities of daily living, education

*Please refer to grantgarciamd.com

Treatment: PT evaluate & treat

Exercises: Range of Motion, Strengthening, Posture Training, Stretching Reduce Swelling, Reduce Pain

Restore Volitional Muscle Control - Emphasis Quadriceps and VMO

Control the Knee Through the Hip - Emphasize the hip's ability to eccentrically control the valgus moment at the knee. Focus on Hip Abduction and ER

Enhance Soft Tissue Flexibility - Emphasis on quadriceps, hamstrings, hip adductors, gastrocnemius, and iliotibial band stretching

Improve Soft Tissue Mobility - Focus on medial and lateral retinacular and capsular tissues Enhance Proprioception and Neuromuscular Control - Weight shifting side-to-side, weight shifting

diagonally, mini-squats, and mini-squats on an unstable surface such as a tilt board. As the patient advances, tilt board squats can be progressed from double leg to single leg

Normalize Gait

Modalities: Per Therapist

Visits per Week: 2-3

Number of Weeks: 6

Weight Bearing Status: Full weight bearing