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MEDIAL COLLATERAL LIGAMENT (MCL) SPRAIN NON-OPERATIVE PROTOCOL

The following is Dr. Cooley's non-operative protocol. The main emphasis focuses on:

- 1. Reducing inflammation
- 2. Restoring full range of motion
- 3. Restoring quadriceps function

PHASE I – INFLAMMATORY:

- Hinged knee brace with varus preload to be worn at all times while weightbearing x6 weeks, ok
 to remove for rest
- Modalities to control inflammation
 - Prescription anti-inflammatories
 - Ice
 - Clinical modalities to control inflammation
- Cardiovascular Exercises
 - Stationary bike-focus on restoring range of motion
 - Pool program as indicated
- Begin range of motion exercises
 - Seated flexion/extension off of table
 - Wall slides
 - Heel slides
- · Begin VMO and quadriceps strengthening
 - Quadriceps setting
 - Multi-plane straight leg raising
 - Open kinetic chain multi-plane hip strengthening
- · Gait training; protected weight-bearing as instructed

PHASE II - SUBACUTE AND EARLY STRENGTHENING:

- Continue with appropriate Phase I activities
- Continue to work toward full range of motion
- Advance strengthening program
 - Proprioception exercises
 - Closed kinetic chain squat program
 - Closed kinetic chain unilateral squats, dips, and step-up progression
 - Closed kinetic chain multi-plane hip strengthening
- Advance intensity and duration of stationary biking program. May add treadmill walking as swelling permits, avoid running and impact activity.

PHASE III - ADVANCED STRENGTHENING:

- · Advance closed kinetic chain strengthening as appropriate
- Begin gym strengthening, avoid leg extensions and lunges



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• Begin running and multi-directional functional drills

PHASE IV - RETURN TO SPORT:

• Re-evaluation with physician and sports test for return to play

**This protocol is intended to provide a general guideline to treating an MCL sprain. Progress should be modified on an individual basis.