

<u>Ultrasound-guided PRP/Tenotomy Protocol: Quad/Patella Tendinopathy</u>

Return to Play Protocols Weeks 6-8: No painful activities, no post-activity soreness >24 hours, no pain with running.

There should be a gradual return to sport activities.

Time	Goals	Precautions/Restrictions	Treatment
Week 0 - 1	 Protect affected site Reduce pain and swelling Safe use of crutches 	 No use of NSAIDs or ice for 4 weeks NWB with crutches for 4 days Knee immobilizer for 1 week 	 Rest Begin gentle active knee ROM Gait training with crutches
Weeks 1 – 2	 Reduce pain and swelling Restore active knee ROM Progress weight bearing 	No use of NSAIDs or ice for 4 weeks	 Rest Continue knee ROM Begin core strengthening Initiate lower limb strengthening Upper Body Aerobic and Strength Exercises Blood Flow Restriction (Optional)
Weeks 2 – 4	 No pain or swelling Full, active knee ROM Continue weight bearing progression Focus is on improving strength Increase tendon tolerance to daily activities 	No use of NSAIDs or ice for 4 weeks	 Continue active knee ROM as needed Joint mobilizations as needed Begin isometric knee strengthening Core strengthening Lower limb strengthening Begin non-impact aerobic exercise (stationary bike, UBE, Optional modalities if available / as indicated: BFR therapy Anti-gravity treadmill for walking gait Pool once incision is healed and cleared by physician
Weeks 4 – 6	 Normalize, independent walking gait Progress knee strengthening exercises Initiate balance/proprioception Begin functional activities 	• Avoid exercises where pain >4/10	 Progressive knee strengthening with resistance bands Gait training progressing to independent Global lower limb strengthening Begin functional strengthening exercises (bridge, mini-squat, step up, etc) Double and single limb balance/proprioception Core strengthening Aerobic training: Walking program when walking with normal gait mechanics Stationary bike
Weeks 6 – 8	 No pain with ADLs Return to sport exercises Increase intensity of knee strengthening exercises Begin balance/proprioception Increase functional activities Begin low level plyometric exercises 	 Progress to high impact/intensity exercise such as running, jumping, and heavy weight lifting Avoid exercises where pain >4/10 	 Increase loading capacity for lower limb strengthening exercises Continue balance/proprioceptive training Core strengthening Begin double and single limb strengthening on leg press Load knee tendons