

PHYSICAL THERAPY PROTOCOL

Patellofemoral Pain Syndrome

Conservative management of anterior knee pain

Patellofemoral pain typically improves with activity modification and strengthening that addresses hip and quadriceps control and movement mechanics, rather than rest alone. Load through the knee is managed while strength and alignment are restored.

General Precautions

- Temporarily limit aggravating activities — deep squatting, stairs, kneeling, and prolonged sitting.
- Keep strengthening and activity within a pain-free range.
- Progress running/impact gradually.

Phase I — Pain Control & Activation Weeks 0-2

Goals

- Reduce pain
- Restore quadriceps and gluteal activation

Precautions / Restrictions

- Avoid painful loaded knee flexion (deep squats, stairs)

Exercises & Interventions

- Quadriceps (VMO) and gluteal activation
- Straight-leg raises
- Patellar mobilizations
- Pain-free range of motion
- Ice after activity; taping/bracing as needed

Criteria to Advance

- Pain reduced
- Good quad/glute activation

Phase II — Strengthening Weeks 2-6

Goals

- Strengthen hips and quadriceps
- Restore flexibility and mechanics

Exercises & Interventions

- Hip strengthening (gluteus medius/maximus emphasis)
- Closed-chain quad strengthening in pain-free range
- Stretching (IT band, hamstrings, quads, calves)
- Balance and movement retraining

Criteria to Advance

- Improving strength
- Reduced pain with daily activity

Phase III — Return to Activity Weeks 6-12

Goals

- Restore full function
- Return to running/sport

Exercises & Interventions

- Progressive strengthening and neuromuscular control
- Movement/landing mechanics retraining
- Gradual running and sport-specific progression

Criteria to Advance

- Symmetric strength
- Pain-free with impact and sport

This protocol is a general guideline. Progression is criteria-based and may be advanced or slowed by Dr. O'Donnell based on intraoperative findings, tissue quality, fixation, and individual healing. Time frames are approximate. Direct questions to the office at (305) 393-8810.