

Criteria to Start Hopping, Sprinting, and Cutting

- ACL Reconstruction Protocols
- MD clearance
 - 10-RM on leg press $\geq 90\%$ vs. uninvolved
 - 10 single leg squats with $\geq 90\%$ external weight vs. uninvolved
 - No compensation patterns or dynamic valgus with jumps

Criteria to Take Return to Sport Test

- MD clearance
- Tolerating sprinting, agility drills, jumping, and hopping at 100% effort without:
 - Compensation strategies
 - Episode of giving way
 - Increased pain
 - New s/s of inflammation
 - Increased effusion

Return to Sport Test

Must pass all tests with $\geq 90\%$ performance

- Single broad jump, land on one foot
- Triple broad jump, land on one foot
- Single leg triple crossover hop
- Single leg forward hop
- Single leg lateral hop
- Single leg medial hop
- Single leg medial rotating hop
- Single leg lateral rotating hop
- Single leg vertical hop
- Single leg triple hop
- Timed 6-meter single leg hop
- 10 yard Lower Extremity Functional Run
 - Sprint/back-peddle, side shuffle, carioca, sprint
 - Recommended 18-22 seconds for males
 - Recommended 20-24 seconds for females
- 10 yard Pro-agility Run
 - Recommended 4.5-6.0 seconds for males
 - Recommended 5.2-6.5 seconds for females

10 Yard Lower Extremity Functional Run

QuickTime™ and a YUV420 codec decompressor are needed to see this picture.

10 Yard Pro-Agility Run

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Functional Training

- All patients post-op ACL reconstruction within CRS network
- Center for Sports Medicine and indoor practice field
- Agility, plyometric, and sport specific training
- \$150/month
 - Insurance visits will not be used
- Up to 3 sessions/week
- Required to see PT for re-evaluations