

Medial Knee Injury

Grade 2-3 - Conservative Protocol

Your Logo

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Initial Guidance:

Aim to control swelling and initiate quadriceps re-activation.

Encourage early, pain-free full range of movement to stimulate mechanotransduction.

Avoid re-testing valgus stress until **3-4 weeks** post-injury.

1 - 2 Weeks

- POLICE protocol for management of pain and swelling/effusion.
- Long lever brace fitted 0-90°.
- Crutches: TTWB to PWB to 1 crutch (opposite side) to FWB (if no limp) as able.
- SQ's (30 reps x 10 daily), SLR if no lag (if lag: perform with brace locked at 0°).
- Stationary bike ASAP (10-20 mins): increase time and resistance as tolerated.
- Hip maintenance exercises: (sitting flexion, side-lying abduction, standing extension).
- Standing hamstring curls if no pain.

3-4 Weeks

- Continue with ROM ex's and brace.
- Gently re-assess stability to check healing (valgus laxity at 20° and 0° knee flexion).
- Start weighted exercises (knee extension, hamstring curls, leg press) between 0-90° in brace.
- Stationary bike for 20 minutes: increase resistance as tolerated.
- Step ups.

5 Weeks

- Re-assess stability to confirm healing (i.e. no valgus laxity at 20° and 0° knee flexion).
- Aim for full symmetrical ROM.
- Open brace fully as per quadriceps control on weights machine.
- Progress walk to run as tolerated in brace.
- Start proprioceptive and balance work once knee stabilised clinically.

6 Weeks +

- Remove brace for walking if normal gait: use brace outdoors as required.
- Continue exercise bike until 12 weeks (at least 20 minutes per day).
- Progress sports specific exercises.
- **For grade 3 injuries wear brace for competition for at least 3 months post-injury.**
- Return to competition if FROM, full strength and >90% of good leg on functional tests (e.g. hop for distance, hop for time, timed cross over hop).

8 Weeks +

If knee remains unstable refer to orthopaedic surgeon for opinion.

References:

- LaPrade, R.F., Wijdicks, C. A. (2012) The Management of Injuries to the Medial Side of the Knee, Journal of Orthopaedic & Sports Physical Therapy. Vol: 42 (3), pp 221-233.
- Wijdicks, C.A., et al (2010). Injuries to the medial collateral ligament and associated medial structures of the knee. J Bone Joint Surg AM. May;92(5):1266-80.