## Physical Therapy Prescription Chronic Patellar Tendinopathy

## Patient Name:

## Today's Date:

Dx: ( LEFT / RIGHT ) Anterior Knee Pain
Pathology: CHRONIC PATELLAR TENDINOPATHY

## MANUAL OKC ECCENTRICS of QUAD

$\qquad$ Knee extension eccentrics

## PRE Progression - **EMPHASIZE ECCENTRIC EXERCISE PROGRAM**

$\qquad$ Eccentric closed chain Isotonics - Step-downs, Short arc squats with heels raised, decline lunge
$\qquad$ Eccentric open chain knee extensions.
** Progress arc as tolerated in later stages of rehab. MUST HAVE PROGRESSIVE OVERLOAD TO QUAD

## FLEXIBILITY AND MOBILITY EXERCISES

___ Achilles
_— Quadriceps

## OTHER THERAPEUTIC ACTIVITIES

Assess for Patellar compression benefit (Cho-Pat)HIP HINGE strengthening exercises (Dead-lift, Bridge, Weighted Hip Thrusters, Nordic HS)Short crank bicycle to warm up
$\qquad$ Cross friction massage and Graston/ASTYM - Should alternate between short manual therapy sessions and exercise. 30s to 1 min of manual then transition to exercise, repeat.
$\qquad$ LE PUSH strengthening exercises (Squat, Step down, Leg Press, Total Gym)
___ Progress to descending Stairmaster
__ Thermotherapy and Modalities prn
_ Foot intrinsic strength to limit rate of pronation
—_Assess posture and functional movement patterns. Corrective exercise as needed

- Neuromuscular re-education to achieve proper coordination of hamstrings, glutes and quads

Each session of therapy should have an increase in resistance or reps.

## UNDERLYING PHILOSOPHY: Tendon must be loaded and exercise Quadriceps. Exercises should cause pain in the 4-6/10 range. MUST PROGRESSIVELY OVERLOAD WHILE ALLOWING FOR RECOVERY FROM STRESS

Frequency \& Duration: (circle one) 1-2 $\quad 2-3 \mathrm{x} /$ week for $\qquad$ weeks Home Program **Please send progress notes.
$\qquad$ M.D.

