

Post-Op ACL Reconstruction Return to Sport Test Instructions

Patient must tolerate all exercises for strengthening, agility, running, sprinting and plyometrics with no demonstration of compensation strategies, reports of pain or instability, or signs/symptoms of inflammation. All testing items on the involved side must be within 90% of the uninvolved to pass the test. Balance must be held for at least 2 seconds without any extra hops.

1. 10 Single Leg Squats with weight: The patient must squat down on one leg at least 60° of knee flexion while maintain balance and motor control. The patient cannot allow their knee to deviate into genu varum or valgum. The patient must complete 10 consecutive repetitions. The patient will hold weight in the form of a weighted vest or dumbbells. To pass the test, the involved leg must squat with at least 90% of weight compared to the uninvolved. Body weight is independent of the test. For example, if the patient squats with 20 pounds of extra weight on the uninvolved leg, he/she must squat with at least 18 pounds of extra weight on the involved leg to pass.

2. Single Broad Jump, landing on one foot: Starting at a designated line, the patient will jump using both legs as far forward as possible, landing on one foot and maintaining balance. To pass, the involved leg must measure at least 90% of the distance compared to the uninvolved leg.

3. Triple Broad Jump, landing on one foot: Starting at a designated line, the patient will jump using both legs three consecutive times. The patient must land on one foot after the third jump and maintain their balance. To pass, the involved leg must measure at least 90% of the distance compared to the uninvolved leg.

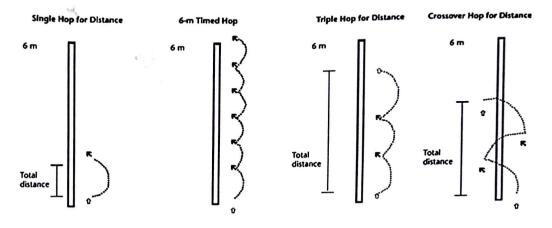
4. Single Leg Forward Hop: Starting at a designated line, the patient will balance on one leg and hop forward as far as possible, landing on the same leg. The patient must maintain their balance. To pass, the involved leg must measure at least 90% of the distance compared to the uninvolved leg.

5. Timed Single Leg Hop for 20 feet: Starting at a designated line, the patient will balance on one leg and hop as fast as they can consecutively a distance of 20 feet (6 meters). To pass, the involved leg must hop 20 feet in at least 90% of the time compared to the uninvolved leg. (6 meters approximately 20 feet on diagram). (See diagram)

6. Single Leg Triple Hop: Starting at a designated line, the patient will balance on one leg and hop forward three times consecutively as far as possible, landing on the same leg. The patient must maintain their balance on the last hop. To pass, the involved leg must measure at least 90% of the distance compared to the uninvolved leg. (See diagram)

7. Single Leg Triple Crossover Hop: Starting at a designated line, the patient will balance on one leg and hop medially at a 45° angle as far as possible, immediately hop laterally at a 45° angle, and then immediately hop medially again at a 45° angle, landing on the same leg. The patient must maintain their balance on the last hop. To pass, the involved leg must measure at least 90% of the distance forward compared to the uninvolved leg. (See diagram)





6 meters = approximately 20 feet

8. Single Leg Lateral Hop: Starting at a designated line, the patient will balance on one leg and hop laterally as far as possible, landing on the same leg. The patient must maintain their balance. To pass, the involved leg must measure at least 90% of the distance compared to the uninvolved leg.

9. Single Leg Medial Hop: Starting at a designated line, the patient will balance on one leg and hop medially as far as possible, landing on the same leg. The patient must maintain their balance. To pass, the involved leg must measure at least 90% of the distance compared to the uninvolved leg.

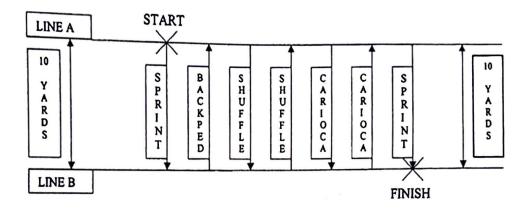
10. Single Leg Medial Rotating Hop: Starting at a designated line, the patient will balance on one leg and hop straight up in the air rotating medially as far as possible, landing on the same leg. The patient must maintain their balance. To pass, the involved leg must measure at least 90% of the angle (e.g. 135°) compared to the uninvolved leg.

11. Single Leg Lateral Rotating Hop: Starting at a designated line, the patient will balance on one leg and hop straight up in the air rotating laterally as far as possible, landing on the same leg. The patient must maintain their balance. To pass, the involved leg must measure at least 90% of the angle (e.g. 135°) compared to the uninvolved leg.

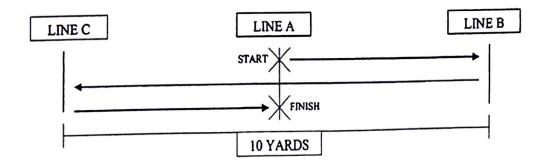
12. Single Leg Vertical Hop: While balancing on one leg and using the arm on the same side as the testing leg, the patient will reach vertically as far as possible without straining. The height to the tip of the patient's middle finger will be measured. The patient will balance on one leg and hop vertically as far as possible reaching with the same arm. The difference between the original standing height and the hopping height will then be measured. To pass, the involved distance must measure at least 90% of the distance compared to the uninvolved leg.



13. 10 Yard Lower Extremity Functional Test: Starting at line A, the patient will sprint ten yards forward to line B then backpedal to line A. Next, the patient will side shuffle to line B then side shuffle back to line A. Then the patient will carioca to line B then carioca back to line A. Finally, the patient will sprint through line B. The patient must make sure to touch each line with his/her foot. The administrator will measure the time it takes the patient to complete the test. (Males \leq 17-20 seconds; Females \leq 19-23 seconds). (See diagram)



14. 10 Yard Pro-Agility Run: The patient will start straddling line A and will turn and sprint five yards to line B. Then the patient will sprint ten yards to line C. Finally, the patient will sprint five yards through line A. The patient must make sure to touch each line with his/her hand. The administrator will measure the time it takes to patient to complete the test. This test will be completed in reverse order (A to C to B to A) to make sure the patient is planting with both the involved and uninvolved foot. (Males ≤ 4.5-5.5 seconds; Females ≤ 5.5-6.5 seconds). (See diagram)



Adopted from Oliver Finlay, PhD