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**Patient Name:**

**Date:**

**Diagnosis:** Patellofemoral Pain

**Pathology:** Excessive Compressive Forces, CMP

### **PHYSICAL THERAPY PRESCRIPTION:**

#### **Resisted leg raises**

SLR at 15° - Perform in neutral rotation and with leg externally rotated  
Hip adduction, abduction, extension, flexion  
Knee flexion

#### **PRE Progression**

Multiple angle isometrics  
Eccentric closed chain isotonic  
Concentric closed chain isotonic i.e. step-ups, short arc squats  
Eccentric open chain isokinetics  
Concentric open chain isokinetics, submaximal  
Eccentric open chain isotonic i.e. knee extension  
Concentric open chain isotonic, submaximal  
Concentric open chain isotonic, maximal  
Progress arc as tolerated in later stages of rehab.

Performed in 30-0° arc

#### **Flexibility Exercises**

Achilles  
Hamstrings  
Medial/Lateral hip/thigh  
Quadriceps  
Iliotibial band  
Lateral retinacular stretching/medial glide

#### **Other Therapeutic Activities**

Assess for patellar taping benefit  
Retro ambulation  
Calf and hip PRE's - emphasize hip external rotation strength  
Short crank bicycle  
Electrical stimulation  
Muscle endurance activities  
Functional closed chain exercises for quadriceps strengthening  
Nordic track  
Progress to Stairmaster/Versaclimber, short arc  
Cryotherapy and modalities PRN

*Underlying philosophy:* Minimize compressive forces and exercise quadriceps in pain-free arcs,  
**advancing arc as tolerated.**

Please send progress notes.

**Physician's Signature:** \_\_\_\_\_