

Home Exercise Program



Page 1 of 5

Treatment

Initial treatment for patellar tendonitis includes using this acronym, LUSKIN:



How can I prevent/manage patellar tendonitis?

Patellar tendonitis is usually caused by overuse during activities such as jumping or running. It can best be prevented by stretching and strengthening your thigh muscles.

After inflammation decreases, stretching and strengthening exercises listed below will help with the pain experienced.

1. Hamstring Stretch - Lie on your back and bring affected leg towards your chest. Grab the back of your thigh and try to extend your leg. Hold this position for 30 to 60 seconds, feeling a stretch in the back of your thigh. Repeat three times. You may also try this with a towel around your foot if it is more comfortable.





2. Quadriceps Stretch - Stand sideways to a wall, about an arm's length away from the wall, with your injured leg towards the outside. Facing straight ahead, keep the hand nearest the wall against the wall for support. With your other hand, grasp the ankle of your injured leg and pull your heel up toward your buttocks. Do not arch or twist your back. Hold this position for 30 seconds. Repeat three times.





WWW.LUSKINOIC.ORG I Los Angeles: 213-741-8330 · Santa Monica: 424-259-6593



Home Exercise Program



Page 2 of 5

This may also be done while laying on the opposite side and grasping the ankle of the affected leg. Do not arch or twist your back. Hold this position for 30 seconds. Repeat three times.



3. **Quadriceps Sets** - Sit on the floor with your injured leg straight in front of you. Press the back of your knee down while tightening the muscles on the top of your thigh. Hold this position for 5 seconds. Complete 3 sets of 10.



4. Straight Leg Raise - Sit on the floor with the injured leg straight and the other leg bent, foot flat on the floor. Pull the toes of your injured leg toward you as far as you can, while pressing the back of your knee down and tightening the muscles on the top of your thigh. Raise your leg six to eight inches off the floor and hold for 5 seconds. Slowly lower it back to the floor. Complete 3 sets of 10.





5. Abduction - Lie on your uninjured side and place leaning on the elbow of your uninjured side and using the arm of the injured side in front of you to stabilize your body. Slowly with the injured leg up, hold for 5 seconds then lower slowly. Be sure to keep your hips steady and don't roll forwards or backwards. Complete 3 sets of 10.







Home Exercise Program



Page 3 of 5

6. Adduction - Lie on your injured side with your top leg bent and flat foot placed in front of the injured leg, which is kept straight. Raise your injured leg as far as you can comfortably and hold it there for 5 seconds. Keep your hips still while you are lifting your leg. Hold this position for 5 seconds, and then slowly lower your leg. Complete 3 sets of 10.





7. Extension - Lie on your stomach. Raise your injured leg as far as you can comfortably and hold it there for 5 seconds. Keep your hips still while you are lifting your leg. Hold this position for 5 seconds, and then slowly lower your leg. Complete 3 sets of 10.





 Knee Extensions - Sit with a small foam roller or rolled up towels or pillow under your knee. Gently and slowly straighten your knee. Hold this position for 5 seconds then gently lower. Complete 3 sets of 10.





9. Clamshells - Lie on your side with your knees slightly bent, keeping your legs and ankles together. Open and close your knees like a clam by lifting your top knee up until its parallel with your hip. Keep your feet together throughout the exercise, move slowly and controlled as if someone is pushing against your knee while you are pressing it up. Complete 3 sets of 10.





WWW.LUSKINOIC.ORG I Los Angeles: 213-741-8330 · Santa Monica: 424-259-6593



Home Exercise Program



Page 4 of 5

10. Bridge with Abduction and Resistance (Aka Banded Bridges) - Start by lying supine (on your back) with your knees bent to 90 degrees and your feet flat on the floor. Place the tied resistance band just above your knees. Bring your feet and knees apart to hip/shoulder width. You should feel the band trying to bring your knees back together. Keeping tension on the band, press into your heels and lift your hips off the table as high as you can into a bridge position. Hold at the top for 3-5 seconds and slowly lower to the starting position. Do not allow the space between your knees to decrease throughout the movement. Repeat for 3 sets of 10 repetitions.







11. Wall Squat - Stand with your back, shoulders, and head against a wall and look straight ahead. Keep your shoulders relaxed and your feet one foot away from the wall, shoulder width apart. Keeping your head against the wall, slowly squat. Do not let your knees fan inwards or outwards. Squat down until your thighs are parallel to the floor. Hold this position for 10 seconds. Slowly stand back up. Complete 3 sets of 10.





12. Reaching Dynamic Balance - Start by standing on one leg. Engage your core and hinge forward at your hips while lifting your opposite leg straight behind you. Reach toward the table with the same side hand as your lifted leg. Coordinate the movement of your torso and lower body so that your chest lowers as your leg is lifting (like a teeter totter). Keeping your leg lifted and core tight, return to the starting position.







Home Exercise Program



Page 5 of 5

When can I return to my sport or activity?

The goal of rehabilitation is to return you to your sport or activity as soon as is safely possible. If you return too soon you may worsen your injury, which could lead to prolonged pain. Everyone recovers from injury at a different rate. Return to your activity will be determined by how soon your knee recovers, not by how many days or weeks it has been since your injury occurred. In general, the longer that you have symptoms before you start treatment, the longer it will take you to get better. You may safely return to your sport or activity when, starting from the top of the list and progressing to the end, each of the following is true:

- Your injured knee can be fully straightened and bent without pain
- Your knee and leg have regained normal strength compared to the uninjured knee and leg
- Your knee is not swollen
- You are able to jog straight ahead without limping
- You are able to sprint straight ahead without limping