Criteria to be met prior to initiation of return to run program

- Trace to no effusion
- Normal ROM
- Sufficient chondral health of tibiofemoral and patellofemoral joints
- Previous history of regular running
- No increased knee pain or effusion with progression of therapeutic activities to date
- ≥90% LSI with single leg squat (max depth) and/or star excursion balance test (anterior reach)
- Able to perform 20 reps off 6” box with ≤2 breaks
- Able to tolerate 20 minutes of walking at a brisk, continuous pace without symptom provocation

<table>
<thead>
<tr>
<th>Week</th>
<th>Session 1</th>
<th>Session 2</th>
<th>Session 3</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Run 1 min; walk 4 min 25 min total*</td>
<td>Run 1 min; walk 4 min 25 min total</td>
<td>Run 1 min; walk 4 min 30 min total</td>
</tr>
<tr>
<td>2</td>
<td>Run 2 min; walk 3 min 25 min total</td>
<td>Run 2 min; walk 3 min 25 min total</td>
<td>Run 2 min; walk 3 min 30 min total</td>
</tr>
<tr>
<td>3</td>
<td>Run 3 min; walk 2 min 25 min total</td>
<td>Run 3 min; walk 2 min 25 min total</td>
<td>Run 3 min; walk 2 min 30 min total</td>
</tr>
<tr>
<td>4</td>
<td>Run 4 min; walk 1 min 25 min total</td>
<td>Run 4 min; walk 1 min 25 min total</td>
<td>Run 20 min continuously</td>
</tr>
</tbody>
</table>

- *If 1 min of jogging is too tenuous, begin with less time, e.g. 30 seconds
- Do not run on consecutive days
- Focus on strengthening and proprioception exercises on non-running days
- Discontinue return to run program and consult PT if:
  - Sharp pain exists in the knee
  - Swelling in the knee
  - Pain worsens as the run progresses
  - Pain is worse later or the following day
- At end of progression, increase slowly with mileage, speed and frequency of running (increase one interval at a time, no more than 10% per week)
- Change footwear every 300-400 miles; base footwear choice primarily on comfort