Treatment Guide for Case Managers
Medial Collateral Ligament (MCL) Injury:

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Mechanism of Injury:	Usually direct blow to the outside of the knee with the foot planted. Often in combination with other ligament or cartilage injuries	
Subjective symptoms:	• Pain with weight bearing • Feeling of instability (Grade III) • Very painful over medial side of knee	
Objective findings:	Physical Exam: • Tenderness over the femoral or tibial MCL insertion • + valgus stress test • May have associated instability	Imaging: • Plain x-rays • MRI Tibial sided MCL tears may require surgical treatment due to a notoriously worse prognosis.
Natural History:	Simple (Grade I-II) MCL tears usually heal in 20-25 days with non-operative treatment and no residual symptoms. Complete MCL tears (Grade III) may require surgical repair if they do not tighten up over 3-4 weeks in serial exams. Often these tears are associated with ACL or PCL injuries. In those cases an operative repair is usually necessary.	
Non-operative Treatment:	• PT • Protected weight bearing • NSAIDS	
Operative Treatment:	Usually only with high Grade tibial sided tears. An artroscopy helps with the diagnosis and allows to address concommitant injuries such as ACL, PCL or meniscus injuries. An open repair with suture anchors may be required. Surgery should be perfomed within 3 weeks of inury	
MMI:	**Non-operative:** 2-10 weeks depending on Grade (I-III)	**Operative:** 8-12 weeks depending on con-commitant procedures
Work status until MMI:	Initially sedentary duty, rapid improvement and release to full activities	Needs to be decided individually