

Rehabilitation Protocol: Osteochondral Allograft Implantation

Name:	Date:
Diagnosis:	Date of Surgery:

Phase I (Weeks 0-6)

- Weightbearing: Non-weightbearing
- Bracing:
 - Hinged knee brace locked in extension (week 1) remove for CPM and rehab with PT
 - o Unlock completely as soon as can perform straight leg raise
- Range of Motion Continuous Passive Motion (CPM) Machine for 6-8 hours per day for 6-8 weeks
 - Set CPM to 1 cycle per minute starting at 40° of flexion
 - Advance 10° per day until full flexion is achieved (should be at 100° by week 6)
 - PROM/AAROM and stretching under guidance of PT
- Therapeutic Exercises
 - Patellar mobilization
 - Quad/Hamstring/Adductor/Gluteal sets Straight leg raises/Ankle pumps

Phase II (Weeks 6-8)

- Weightbearing: Partial weightbearing (25% of body weight)
- Range of Motion Advance to full/painless ROM (patient should obtain 130° of flexion)
- Therapeutic Exercises
 - Continue with Quad/Hamstring/Core strengthening
 - o Begin stationary bike for ROM

Phase III (Weeks 8-12)

- Weightbearing: Gradually return to full weightbearing
- Range of Motion Full/Painless ROM
- Therapeutic Exercises
 - Begin closed chain exercises wall sits/shuttle/mini-squats/toe raises
 - Gait training
 - Continue with Quad/Hamstring/Core strengthening
 - o Begin unilateral stance activities

Phase IV (Months 3-6)

- Weightbearing: Full weightbearing with a normal gait pattern
- Therapeutic exercise
 - o Advance closed chain strengthening exercises, proprioception activities
 - Sport-specific rehabilitation jogging at 4-6 months
 - Return to athletic activity 9-12 months post-op
- Maintenance program for strength and endurance

Comments:

Frequency: times per week Dur	ration: weeks
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Signature: _

Date:	
Date.	