

## FEMORAL CONDYLE OSTEOCHONDRAL ALLOGRAFT

**Name:** \_\_\_\_\_

**Diagnosis:** \_\_\_\_\_

**Date of Surgery:** \_\_\_\_\_

Frequency: 1 2 3 4 times / week      Duration: 1 2 3 4 5 6 Weeks

\_\_\_\_Weeks 0-2:

- Toe touch weight bearing only (with crutches)
- Brace locked in extension at all times except when using CPM and exercises
- Passive motion from 0-90 degrees (CPM and exercises)
- Quad sets, patellar mobs, ankle pumps, straight leg raises in brace

\_\_\_\_Weeks 2-6:

- May discontinue brace when comfortable; maintain TTWB precautions
- PROM/AAROM as tolerated; continue CPM use up to full allowable motion
- Patella mobs, tib/fib joint mobs, quad sets, hamstring sets, gluteal sets, SLR without brace, side lying hip/core

\_\_\_\_Weeks 6-8

- Advance weight bearing 25% per week until full weight bearing
- Achieve full ROM (if not attained already)
- Further advance of week 2-6 exercises

\_\_\_\_Weeks 8-12:

- Gait training
- Begin closed chain activities – wall sits, shuttle, mini-squats, toe raises
- Begin unilateral stance activities and balance training

\_\_\_\_Weeks 12 - 6 months:

- Advance above exercises as tolerated – focus on maximizing core/glut/quad/hamstrings without restriction
- Elliptical, bike, pool as tolerated; impact/running not before 6 months

\_\_\_\_Month 6+:

- Transition to sport specific activity with slow integration of impact/running (Alter-G if available) from 6-8 months
- Plyometrics/dynamic loading beginning at 8 months

Signature \_\_\_\_\_

Date: \_\_\_\_\_