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# **Rehabilitation Protocol: Osteochondral Allograft Implantation**

Name:\_

Diagnosis:	
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#### Phase I (Weeks 0-6)

- Weightbearing: Non-weightbearing
- **Bracing**:
  - Hinged knee brace locked in extension (week 1) remove for CPM and rehab with PT
  - Weeks 2-6: Gradually open brace in 20 degree increments as quad control is obtained
  - D/C brace when patient can perform straight leg raise without an extension lag
- Range of Motion: Continuous Pass Motion (CPM) machine for 6-8 hours per day for 6-8 weeks
  - Set CPM to 1 cycle per minute starting at 40 degrees of flexion
  - Advance 10 degrees per day until full flexion is achieved (should be at 100 degrees 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 degrees of flexion)
- Therapeutic Exercises:
  - Continue with Quad/Hamstring/Core Strengthening
  - 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/Hamstrings/Core Strengthening
  - Begin unilateral stance activities

## Phase IV (Months 3-6)

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

#### **Comments:**

Frequency: \_\_\_\_\_ times per week

Duration: \_\_\_\_\_ weeks

Signature:\_\_\_\_\_

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

Date of Surgery: