

## Rehabilitation Protocol: Open Osteochondral Allograft Transplantation of Patella

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

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

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

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

**Phase I (Weeks 0-6)**

- **Weightbearing:** Weightbearing as tolerated with hinged knee brace locked in extension
- **Bracing:**
  - o Hinged knee brace locked in extension (week 1) - remove for CPM and rehab with PT
  - o Weeks 2-6: Gradually open brace in 20° increments as quad control is obtained
  - o D/C brace when patient can perform straight leg raise without an extension lag
- **Range of Motion** - Continuous Passive Motion (CPM) Machine for 6-8 hours per day for 6-8 weeks
  - o Set CPM to 1 cycle per minute - starting at 40° of flexion
  - o Advance 10° per day until full flexion is achieved (should be at 100° by week 6)
  - o PROM/ AAROM and stretching under guidance of PT
- **Therapeutic Exercises**
  - o Patellar mobilization
  - o Quad/Hamstring/ Adductor /Gluteal sets - Straight leg raises/ Ankle pumps

**Phase II (Weeks 6-8)**

- **Weightbearing:** Weightbearing as tolerated, unlock hinged knee brace
- **Range of Motion** - Advance to full/painless ROM (patient should obtain 130° of flexion)
- **Therapeutic Exercises**
  - o Continue with Quad/Hamstring/Core strengthening
  - o Begin stationary bike for ROM

**Phase III (Weeks 8-12)**

- **Weightbearing:** Weightbearing as tolerated, D/C hinged knee brace
- **Range of Motion** - Full/Painless ROM
- **Therapeutic Exercises**
  - o Begin closed chain exercises - wall sits/shuttle/mini-squats/toe raises
  - o Gait training
  - o Continue with Quad/Hamstring/Core strengthening
  - o Begin unilateral stance activities

**Phase IV (3-6 months)**

- **Weightbearing:** Full weightbearing with a normal gait pattern
- **Therapeutic exercise**
  - o Advance closed chain strengthening exercises, proprioception activities
  - o 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

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

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

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