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***Osteochondral Allograft: Femoral Condyle***

This information and protocol is a guideline, individual variations and changes will apply

<u>Postop</u>	<u>Goals</u>	<u>Precautions</u>	<u>Exercises</u>
<b>Weeks 0-2</b> HEP daily	Full passive extension Edema and pain control Promote independence	TTWB (20%) XROM Brace locked at 0° except for approved exercises and CMP  CPM (6hrs/day) Weeks 0-2: 0-40° Advance 5-10° per day as tolerated	Quad sets/SLR Calf pumps Passive leg hangs to 90° Stretches: hamstring and gastroc
<b>Weeks 2-6</b> PT 1-2x/week HEP daily	Full passive extension 120° knee flexion Prevent quad inhibition Edema and pain control Promote independence	TTWB (20%) Brace locked at 0° except for approved exercises and CMP  CPM (6hrs/day) Weeks 2-4: 0-90° Weeks 4-6: 0-120°	AA/PROM pain free Towel extension Patella mobilization Quad re-education SLR in all planes Hip/Core resisted exercises LE flexibility exercises
<b>Weeks 6-12</b> PT 2-3x/week HEP daily	Full ROM Normal gait pattern Ascend 8" step with control Normal patella mobility Improve ADL endurance	Progress WB 25% per week until full DC brace when adequate quad Avoid descending stairs reciprocally Avoid painful activities No running	Continue above exercises Gait training Closed chain activities: wall sits, mini-squats, toe raises, stationary bike, leg press 0-60° Proprioception training Initiate step-up program
<b>Weeks 12-20</b> PT 2-3x/week HEP daily	Return to normal ADLs Improve endurance Descend 8" step with control 85% limb symmetry Improve strength/flexibility	WBAT Avoid painful activities No running  Forward step down test at 4 months Isokinetic testing at 4 months	Continue and advance above Progress squat program Leg press (emphasize eccentrics) Retrograde treadmill Initiate step down program Advance to elliptical, bike, pool Open chain extension to 40°
<b>Weeks 20+</b> PT 1x/week HEP daily	No apprehension with sport specific movements Maximize strength and flexibility to meet sporting demands	Avoid painful activities No running until: Strength >70% contralateral No agility training until: Strength >90% contralateral No RTP until: Passes RTP evaluation MD clearance	Continue and advance above Begin forward running Begin plyometric program