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Osteochondral Autograft Transfer Surgery (OATS) and Osteochondral Allograft Transplant Surgery – Rehab Protocol

The intent of this protocol is to provide the therapist and patient with guidelines for the post-operative rehabilitation course after Mircofracture surgery of the patella or trochlea. This protocol is based on a review of the best available scientific studies regarding microfracture. It is by no means intended to serve as a substitute for one's clinical decision making regarding the progression of a patient's post-operative course. It should serve as a guideline based on the individual's physical exam/findings, progress to date, and the absence of post-operative complications. If the therapist requires assistance in the progression of a post-operative patient they should consult with Dr. Seneviratne.

Progression to the next phase based on Clinical Criteria and/or Time Frames as appropriate.

Phase One (0-6 weeks)

- Decrease pain.
- Non Weight Bearing as with crutches.
- Brace
 - 0-1 week
 - Locked in full extension at all times. Remove for CPM and exercises only.
 - 2-4 weeks
 - Gradually open brace in 20deg increments as quad control is gained.
 - Discontinue use of brace when quads can control SLR without an extension
- Range of Motion
 - 0-6 weeks:
 - CPM: use for 6-8 hours per day begin at 0-40deg, 1 cycle/minute increasing 5-10deg daily per patient comfort. Patient should gain 100deg by week 6
 - Therapeutic exercises 1- 4 weeks
- PROM/AAROM to tolerance
- Patella and tibiofibular joint mobs (grades I & II)
- $\circ~$ Stationary bike for ROM
- $\circ\;$ Quad, hamstring, adduction, and gluteal sets
- Hamstring stretches
- o Hip strengthening
- \circ SLR
- o Ankle pumps

Phase Two (6-8 weeks)

- Weight bearing progress to full weight bearing as tolerated.
- Brace
 - None.



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- Range of motion
 - Gradually increase flexion.
 - Patient should obtain 130deg of flexion
- Therapeutic exercises
 - Gait training
 - Scar and patellar mobs
 - Quad/hamstring strengthening
 - Begin closed chain activities (wall sits, shuttle, mini-squats, toe raises)
 - Begin unilateral stance activities

Phase Three (8 to 12 weeks)

- Weight bearing as tolerated with normalized gait pattern
- Brace none
- ROM gain full and pain free motion
- Therapeutics
 - Treadmill walking progress to jogging
 - Advance closed chain strengthening
 - Stairmaster, balance, and proprioception activities
 - Sport specific training at 6 months.
- Initiate plyometric program at 6-9months post op.