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REHAB PROTOCOL: Osteochondral Allograft Transplantation

Name: _____

Date: _____

Diagnosis: _____

Date of Surgery: _____

Phase I (Weeks 0-6)

Weightbearing: Non-weightbearing

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: Partial weightbearing (25% of body weight)

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: Gradually return to full weightbearing

Range of Motion – Full/Painless ROM

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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 (Months 3-6)

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: _____