

## Matthew Gotlin, MD 159 East 74<sup>th</sup> Street New York, NY 10021

### **<u>REHAB PROTOCOL</u>**: Osteochondral Autograft (OATS)

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  $20^\circ$  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

o Stationary bike for ROM

### Phase II (Weeks 6-8)

**Weightbearing:** Advance to full weightbearing as tolerated -- discontinue crutch use **Range of Motion** – Advance to full/painless ROM (patient should obtain 130° of flexion) **Therapeutic Exercises** 

# Therapeutic Exercises

- o Closed chain exercises wall sits, shuttle, mini-squats, toe raises
- o Gait training
- o Patellar mobilization
- o Begin unilateral stance activities

159 East 74th Street New York, NY 10021 Tel: 212-737-3301 Fax: 212-734-0407

2 Overhill Rd, Suite 310 Scarsdale, NY 10583 Tel: 914-725-6970 Fax: 914-725-6972 1600 Stewart Ave, Suite 100 Westbury, NY 11590 Tel: 516-243-8506 Fax: 212-734-0407

1870 Richmond Road Staten Island, NY 10306 Tel: 718-285-7118 Fax: 212-734-0407 161 Atlantic Avenue Brooklyn, NY 11201 Tel: 212-737-3301 Fax: 212-734-0407 200 West 13<sup>th</sup> Street, 6<sup>th</sup> Floor New York, NY 10077 Tel: 212-737-3301 Fax: 212-734-0407 9226 Kennedy Boulevard North Bergen, NJ 07047 Tel: 212-737-3301 Fax: 212-734-0407

# Phase III (Weeks 8-12) Weightbearing: Full weightbearing Range of Motion – Full/Painless ROM Therapeutic Exercises o Advance closed chain strengthening exercises, proprioception activities o Sport-specific rehabilitation Gradual return to athletic activity as tolerated o Jogging -- 3 months o Higher impact activities – 4-6 months Maintenance program for strength and endurance

**Comments:** 

Frequency:	times per week
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Duration: \_\_\_\_\_weeks

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