

Rehabilitation Protocol: Osteochondral Allograft to Femoral Condyle

Phase I: 0-6 weeks

- Brace: Locked at 0 degrees extension for ambulation 0-6 wks & sleeping x2 wks, okay to unlock for ROM
- ROM: goals as follows-
 - 0-2 weeks: 0-30
 - 3-4 weeks: 0-60
 - 4-6 weeks: 0-90
- Weightbearing: NWB until 4 weeks postop. 50% Heel touch weightbearing in brace locked in extension weeks 4-6
- Exercises:
 - Patella mobilization
 - Straight leg raise supine with brace locked at 0 degrees
 - Quad sets
 - Heel slides
 - Ankle pumps
 - Passive leg hangs to brace limits at home
 - Glute sets, clamshells
 - Side lying hip and core
 - NMES

Phase II: 6-8 weeks

- Brace: unloader brace
- ROM: Gradual progression of ROM until full
- Weightbearing: Advance from heel touch WB to WBAT over a min. two-week period
- Exercises:
 - Gait normalization
 - Eccentric quads & hamstrings
 - Advance core, glute, and pelvic stability

Phase III: 8-12 weeks

- Brace: unloader brace
- ROM: full
- Weightbearing: WBAT
- Exercises:
 - Progress closed chain activities and gait training
 - Begin unilateral stance activities, balance training
 - Hamstring work
 - Hip/core/glutes
 - Begin stationary bike with low resistance as tolerated
 - Light leg press 0-60 deg
 - Mini squats
 - Wall sits

Phase IV:
12 weeks-
6 months

- Brace: none vs unloader brace optional
- ROM: full
- Weightbearing: WBAT
- Exercises:
 - Advance phase II exercises
 - Maximize core/glutes/pelvic stability work
 - Eccentric hamstrings
 - Balance and single leg stabilization
 - Swimming as tolerated after 12 wks
 - Elliptical as tolerated after 16 weeks

Phase V:
6-12 months

- Brace: none
- ROM: full
- Weightbearing: WBAT
- Exercises:
 - Progress strengthening exercises
 - Single leg strengthening
 - Advance functional activity *without* impact
 - Return to sport-specific activity and impact only when cleared by MD, typically after 8 months minimum