



PHYSICAL THERAPY PROTOCOL
 FEMORAL CONDYLE OSTEOCHONDRAL LESION ORIF

| <u>Postop</u> | <u>Goals</u> | <u>Precautions</u> | <u>Exercises</u> |
|-------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Weeks 0-2 PT 1-2x/week HEP daily | Full passive extension Edema and pain control Promote independence | TTWB (20%) Brace locked at 0° except for approved exercises Flexion Limited: Weeks 0-2: 0-30° | Quad sets/SLR with brace on Calf pumps Stretches: hamstring and gastroc |
| Weeks 3-6 PT 1-2x/week HEP daily | Full passive extension 90° knee flexion Prevent quad inhibition Edema and pain control Promote independence | TTWB (20%) Brace locked at 0° except for approved Flexion Limited: Weeks 2-4: 0-60° Weeks 4-6: 0-90° | A/AA ROM pain free Active Prone Hamstring Curls Towel extension Patella mobilization Quad re-education SLR in all planes Hip/Core resisted exercises LE flexibility exercises |
| Weeks 6-12 PT 2-3x/week HEP daily | Full ROM Normal gait pattern Ascend 8" step with control Normal patella mobility Improve ADL endurance | Progress to WBAT(pending office visit with x-ray clearance) 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, heel raises, stationary bike, leg press 0-60° Proprioception training Initiate step-up program |
| Weeks 12-20 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° |
| Weeks 20+ 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 RTS evaluation MD clearance ** | Continue and advance above Begin forward running Begin plyometric program |

** Completion of RTS (Return to Sport) testing not mandatory, but recommended at 6 months post-op for competitive athletes returning to play after rehab

IF QUESTIONS: PLEASE CALL 469-800-7200