



PHYSICAL THERAPY PROTOCOL  
FEMORAL CONDYLE OSTEOCHONDRAL LESION ORIF

<u>Postop</u>	<u>Goals</u>	<u>Precautions</u>	<u>Exercises</u>
<b>Weeks 0-2</b> 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
<b>Weeks 3-6</b> 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
<b>Weeks 6-12</b> 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
<b>Weeks 12-20</b> 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°
<b>Weeks 20+</b> 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**