

FEMORAL CONDYLE OSTEOCHONDRAL ALLOGRAFT
PHYSICAL THERAPY PROTOCOL

Recommend 2-3x/week for 8 weeks
Please contact office for renewal as needed

Weeks 0-2	<ul style="list-style-type: none"> • Toe touch weight bearing only (with crutches) • Brace locked in extension at all times except when using CPM and exercises • Passive motion from 0-90° (CPM and exercises) • Quad sets, patellar mobilization, ankle pumps, straight leg raises in brace
Weeks 3-6	<ul style="list-style-type: none"> • May discontinue brace when comfortable; maintain TTWB precautions • PROM/AAROM as tolerated; continue CPM use up to full allowable motion • Patellar mobilization, tib/fib joint mobilization, quad sets, hamstring sets, gluteal sets, SLR without brace, side lying hip/core
Weeks 7-8	<ul style="list-style-type: none"> • Advance weight bearing 25%/week until full weight bearing • Achieve full ROM (if not attained already) • Further advance of weeks 3-6 exercises
Weeks 9-12	<ul style="list-style-type: none"> • Gait training • Begin closed chain activities – wall sits, shuttle, mini-squats, toe raises • Begin unilateral stance activities and balance training
Weeks 12 – 6 months	<ul style="list-style-type: none"> • Advance above exercises as tolerated – focus on maximizing core/glut/quad/hamstrings without restriction • Elliptical, bike, pool as tolerated; impact/running not before 6 months
Months 6+	<ul style="list-style-type: none"> • Transition to sports-specific activity with slow integration of impact/running (Alter-G if available) from 6-8 months • Plyometrics/dynamic loading beginning at 8 months