

ATTENTION PHYSICAL THERAPISTS—STRESS IMPORTANCE OF THE FOLLOWING:

- Place patient in brown compression stocking (20-30 mmHg) at first PT appointment.
 Wear during daytime only and d/c at night—instruct patient/family member how to don/doff stocking
 - May discharge when no swelling or effusion- typically 3-4 weeks p/o
- Stress early knee extension. Should reach full knee ext by 2 weeks post-op.
- Stress <u>no pillows under popliteal fossa</u>. Always under calf/heel only to progress knee extension.

REHABILITATION GUIDELINES SPORTSMETRICS REHAB PROTOCOL FOR BIOCARTILAGE OF FEMORAL CONDYLE

DOS:

	WEIGHT	BRACE	ROM	EXERCISES
	BEARING			
PHASE 1	Non-WB	0-2 weeks:	0-6 wks:	0-2 wks : Quad sets, SLR, calf pumps,
0-6 weeks		Locked in	beginning at	passive leg hangs to 90 degrees at home
		extension at all	0-40 degrees;	
		times	advance 5	2-6 wks : PROM/AAROM to tol., patella
			degrees daily	and tibiofibular joint mobs, quad,
		Off for exercise	as tol.	hamstring, and glut sets, SLR, side-lying
		only		hip and core, scar mobs 4-6 weeks when
				adequate healing
		d/c after 2 wks		
PHASE 2	Advance 25%	None	Full	Advance Phase 1 exercises
6-8 weeks	until full			
PHASE 3	Full	None	Full	Gait training, being closed-chain
8-12 weeks				activities: wall sits, shuttle, mini-squats,
				toe raises
				Begin unilateral stance activities, balance
				training
PHASE 4	Full	None	Full	Advance Phase 3 exercises; maximize
12 weeks- 6 months				core/glutes, pelvic stability work,
				eccentric hamstrings
				May advance to elliptical, bike, pool as
				tolerated.
PHASE 5	Full	None	Full	Advance functional activity
6-12 months				
				Return to sport-specific activity and
				impact when cleared by MD after 8
				months