



Call my assistant Faith or Alex for appts, questions, concerns: 307-745-1409
Call 307-745-8851 for appts, questions, concerns after business hours

REHABILITATION GUIDELINES FOR OATS PROCEDURE

PHASE I (0-6 WEEKS POST-OP)

DATES:

| | |
|---------------------------------|--|
| Appointments | <ul style="list-style-type: none"> Follow-up visit with MD 7-10 days after surgery Start physical therapy within first 7 days after surgery 2x week |
| Rehabilitation Goals | <ul style="list-style-type: none"> Protect surgical graft site in knee Decrease inflammation Gain full knee ROM and patellar mobility Regain quadriceps control |
| Precautions | <ul style="list-style-type: none"> TTWB x 6 weeks If knee brace ordered ambulate locked at 0 degrees x 6 weeks Gain full knee extension immediately Gain Knee Flexion gradually: 0-60 degrees 1-2 weeks, 0-90 degrees 3-4 weeks, 0-110 5-6 weeks, then full ROM Avoid Open Chain ex's x 6 weeks |
| Suggested Therapeutic Exercises | <ul style="list-style-type: none"> Quadriceps, Glut, and Hamstring sets 4-way straight leg raises Prone knee extension hangs Wall slides and heel slides for PROM knee flexion Pool at 3-4 weeks s/p if incisions fully closed and cleared for PWB by MD |
| Progression Criteria | <ul style="list-style-type: none"> Full knee extension Able to do straight leg raise with good quad control |

PHASE II (6-12 WEEKS POST-OP)

DATES:

| | |
|----------------------|---|
| Appointments | <ul style="list-style-type: none"> Follow-up visit with MD at 6 weeks Continue with physical therapy 2x week |
| Rehabilitation Goals | <ul style="list-style-type: none"> Gradual progression of weight bearing to full Normalize gait Full knee AROM Progression of quad and hip strength now in closed kinetic chain |
| Precautions | <ul style="list-style-type: none"> Progress weight bearing 25% per week until full weight bearing Gait with crutches weaning off by 8-10 weeks Avoid loading knee in deep flexion to protect implant site No impact activities until 12 weeks post op |



| | |
|---------------------------------|---|
| Suggested Therapeutic Exercises | <ul style="list-style-type: none"> Pool walking to normalize gait Closed kinetic chain hip strength (bridges, step-up/downs) Double leg balance and proprioception drills progressing to single leg Partial Squats and Lunges to 60 degrees or less of knee flexion |
| Cardiovascular Exercises | <ul style="list-style-type: none"> Stationary bike Pool progressing to land treadmill for gait |
| Progression Criteria | <ul style="list-style-type: none"> Normal gait pattern Full knee ROM Functional movement on affected leg with steps, gait, and weight shift Able to hold single leg stance for 15 seconds |

PHASE III (12 TO 18 WEEKS POST-OP)

DATES:

| | |
|---------------------------------|--|
| Appointments | <ul style="list-style-type: none"> Continue with physical therapy 1-2x week |
| Rehabilitation Goals | <ul style="list-style-type: none"> Quality movement with control and no pain with functional activities Increase muscular strength to within 90% of contralateral leg Gradual return to recreational activities |
| Precautions | <ul style="list-style-type: none"> Avoid post-activity swelling and pain Pain free strengthening program |
| Suggested Therapeutic Exercises | <ul style="list-style-type: none"> CKC exercises such as deep squats, lunges, single leg press Single leg balance exercises such as step-up/downs, single leg squat, y-balance test Hip and core strength continue Slow return to impact loading near end of phase such as double leg jump |
| Cardiovascular Exercises | <ul style="list-style-type: none"> Stationary Bike Treadmill walking, slow progression to run/walk program Swimming |
| Progression Criteria | <ul style="list-style-type: none"> Return to sport cleared before fully returning to high impact sports Dynamic neuromuscular control in multiple planes |

References: Baer, Geoffery MD, Sherry, Marc PT at University of Wisconsin rehabilitation guidelines

PT name and date: Julie Perumal PT, DPT

CREDIT MAMMOTH ORTHOPEDICS