



**Kevin B. Freedman, M.D.**  
 Sports Medicine  
 27 South Bryn Mawr Ave  
 Bryn Mawr, PA 19010-3470  
 Phone: (610) 527-2727  
 Fax: (610) 527-1588

## OSTEOCHONDRAL AUTOGRAFT TRANSPLANT REHABILITATION PROTOCOL

	<b>WEIGHT BEARING</b>	<b>BRACE</b>	<b>ROM</b>	<b>THERAPEUTIC EXERCISE</b>
<b>PHASE I 0 - 6 weeks</b>	Non-weight bearing	<b>0-1 week:</b> locked in full extension (remove for CPM and exercise) <b>2-4 weeks:</b> gradually open brace in 20 ° increments as quad control is gained - discontinue use of brace when quads can control SLR without an extension lag	<b>0-6 weeks:</b> CPM: use for 6-8 hours per day - begin at 0-50 °, 1 cycle/minute - increasing 5-10 ° daily per patient comfort - patient should gain 100 ° by week 6	PROM/AAROM to tolerance, patella and tibiofibular joint mobs (grades I & II), stationary bike for ROM, quad, hamstring, adduction, and gluteal sets, hamstring stretches, hip strengthening, SLR, ankle pumps
<b>PHASE II 6 - 8 weeks</b>	Progress to full weight bearing	None	Gradually increase flexion- patient should obtain 130 ° of flexion	Gait training, scar and patellar mobs, quad/hamstring strengthening, begin closed chain activities (wall sits, shuttle, mini-squats, toe raises), begin unilateral stance activities
<b>PHASE III 8 - 12 weeks</b>	Full with a normalized gait pattern	None	Full and pain-free	Advance activities in phase II