CARTICEL IMPLANTATION FEMORAL CONDYLE REHABILITATION PROTOCOL JOSEPH R. MISSON, MD

PHASE I - PROTECTION PHASE (WEEK 0-6)

Brace:

Locked at 0 degrees during weight bearing (NWB x 2wks)

Sleep in locked brace for 2-4 weeks

Unlock brace for motion exercises only, during first 2 weeks

Weight Bearing:

NWB x 2 weeks.

Toe Touch Weight Bearing (approx 20-30lbs) at 3 weeks

PWB (approx 1/4 body weight) at weeks 4 - 5

Range of Motion:

Begin 24hr post-op

Full passive knee extension immediately

Initiate CPM day 24 - 48 hours post-op, for total of 8-12 hours/day.

CPM set at 0-40 degrees flexion for 2-3 weeks

Progress CPM as tolerated 5 - 10 degrees per day

May continue CPM 6-8 hours/day for up to 6 weeks

Patellar mobilizations (4-6 times per day)

Passive Knee flexion ROM 2-3x/day

Knee flexion ROM goals

Week 1-2 90 degrees Week 3-4 105 degrees Week 5-6 120 degrees

Stretch Hamstring and calf

Strengthening Program:

Ankle pump with theraband

Quad Set

Multi-angle isometrics co-contractions for quad and hamstring

Active knee ext 90 - 40 degrees without resistance

Straight leg raise x4

Stationary bike when ROM allows

Biofeedback and e-stim as needed

Isometric leg press by week 4 (multi angle)

May begin pool program for gait training and exercise after week 4

Precautions:

Reduce activities if pain or inflammation occurs

Gradual return to daily activities

Extended standing should be avoided

Utilize ice, compression and elevation at home to decrease swelling

Criteria to Progress to Phase II:

Full passive and active knee extension

Minimal pain and swelling

Knee flexion to 120 degrees

Voluntary quadriceps activity

PHASE II - TRANSITION PHASE (WEEKS 6-12)

Brace:

Discontinue post-operative brace at week 6 unless specified otherwise by the surgeon

Weight-Bearing:

Progress weight bearing as tolerated

Progress to FWB and discontinue crutches by 8-9 weeks

Range of Motion:

Gradual increase ROM

Progress knee flexion to 125 - 135 degrees

Continue patellar mobs and stretching as needed

Strengthening Exercises:

Initiate weight shifts at week 6

Initiate mini-squats 0 - 45 degrees

Closed kinetic chain leg press

Heel Raises

Open kinetic chain knee extension progress 1lb/week (0 - 45 degrees)

Stationary bike with low resistance

Treadmill walking

Balance and proprioception drills

Forward and lateral step ups

Precautions:

Gradually increase standing and walking time as pain and swelling diminish

Criteria to Progress to Phase III:

Full ROM

Strength Hamstring within 10% - 20% of contralateral leg

Quadriceps within 20% - 30% of contralateral leg

Balance testing within 30% of contralateral leg for single leg stance

Able to walk 1-2 miles or bike for 30 minutes

PHASE III: MATURATION PHASE (WEEK 12-26)

Range of Motion:

Should have 125 - 135 degrees flexion

Exercise Program:

Leg press (0 - 90 degrees, unless patellofemoral pain, then 0 - 45 degrees)

Squats (0 - 60 degrees)

Step-ups progressing from 2" - 8"

Forward lunge

Walking program

Open kinetic chain knee extension with ankle weight (0 - 90 degrees, unless patellofemoral pain, then 0 - 45 degrees)

Bicycle

Stair machine, Elliptical machine, ski machine

Swimming

PHASE III CONTINUED

Maintenance Program:

Initiate by weeks 16 - 20

Bicycle with low resistance, increase time

Progressive walking

Pool exercise for entire lower extremity

Straight leg raises

Leg Press

Heel Raises

Wall Squats

Hip abd/add

Forward lunges

Step-ups

Stretching quadriceps and hamstrings

Criteria to Progress to Phase IV:

Full non-painful ROM

Strength within 80% - 90 % of contra lateral extremity

Balance and/or stability within 75% of contra lateral extremity in single leg stance.

Minimal to no pain, inflammation or swelling from exercises or functional activities

PHASE IV - FUNCTIONAL ACTIVITIES PHASE (WEEK 26-52)

Exercises:

Continue Maintenance program 3-4x/wk

Progress resistance as tolerated

Emphasis on lower extremity strength and flexibility

Progress agility and balance drills

Impact loading program should be specialized to the patient's demands

Progress sport programs depending on patient variables

Functional Activities:

Patient may return to various sport activities as progression in rehabilitation and cartilage healing allows.

Generally, low-impact sports such as swimming, skating, in-line skating, and cycling are permitted at about 6 months

Higher impact sports such as jogging, running, and aerobics may be performed at 8 - 9 months for small lesions or 9 - 12 months for larger lesions.

High impact sports such as tennis, basketball, football, and baseball may be allowed at 12 - 18 mo.

** If, at any time, pain or swelling develops, these high impact activities my be discontinued and the surgeon should be notified.

Physician Signature		