CARTICEL IMPLANTATION TROCHLEA REHABILITATION PROTOCOL JOSEPH R. MISSON, MD

PHASE I - PROTECTION PHASE (WEEK 0-6)

Brace:

Locked at 0 degrees during ambulation and weight bearing acivities Sleep in locked brace for 4 weeks

Weight Bearing:

Immediate partial weight bearing in full extension, as tolerated Toe Touch Weight Bearing (approx 20-30lbs) at 3 weeks 25% weight bearing with brace locked 50% body weight by week 2 in brace 75% body weight by weeks 3 - 4 in brace

Range of Motion:

Immediate motion exercise day 2 Full passive knee extension immediately Initiate CPM on day 2, 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

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

Stretch Hamstring and calf

Strengthening Program:

Ankle pump with theraband Quad Set Toe - calf raises by week 2 Straight leg raise x4 Stationary bike when ROM allows Biofeedback and e-stim as needed Isometric leg press by week 4 (multi angle) Initiate weight shifts by week 4 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 Use caution with stair climbing 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 115-120 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 6-8 weeks

Range of Motion:

Maintain full passive knee extension Gradual increase ROM Progress knee flexion to 120-125 degrees by week 8 Continue patellar mobs and stretching as needed

Strengthening Exercises:

Initiate mini-squats 0 - 45 degrees by week 8 Closed kinetic chain leg press, 0-60 degrees by week 8 Heel Raises Open kinetic chain knee extension without resistance Begin knee extension 0-30 degrees then progress to deeper angle (max 0-60 degrees)' Stationary bike with low resistance (gradually increase time) Stair machine at week 12 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: REMODERLING PHASE (WEEK 13 - 32)

Range of Motion:

Should have 125 - 135 degrees flexion Exercise Program: Leg press (0 - 60 degrees; progress to 0-90 degrees if no pain) Squats (0 - 60 degrees) Step-ups progressing from 2" - 6" Forward lunge Walking program on treadmill Open kinetic chain knee extension (90-40 degrees) - progress 1 lb. every 10 - 14 days if no pain or crepitus - must monitor symptoms Bicycle Stair machine, Elliptical machine, ski machine Swimming

PHASE III CONTINUED

Functional Activities:

As patients improves, you may increase walking (distance, cadence, incline, etc) Light running can be initiated toward end of phase based on physician evaluation

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 (0-45 degrees) Hip abd/add 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 - MATURATION PHASE (8 - 15 MONTHS)

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 No jumping or plyometric exercises until 12 months Progress sport progreams 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, patient develops extensive crepitus, pain or swelling, must stop these high level activities and inform surgeon