

Tom Minas, M.D. Brigham and Women's Hospital
Cartilage Repair Center, 850 Boylston Street (Rt. 9) Suite 112, Chestnut Hill, MA 02467
Telephone: (617) 732-9967 Fax: (617) 732-9272

Tibia and Femur

Autologous Chondrocyte Transplantation PT Protocol (#8)
Stage 2- Transitional Phase (7-12 weeks)

PRIMARY GOALS

DO NOT OVERLOAD GRAFT
INCREASE TIBIAL-FEMORAL AND PATELLA-FEMORAL MOBILITY
RESTORE QUADRICEPS CONTROL

- BRACE** ♦Unloading brace to be worn at all times for at least 6-9 months after surgery
- GAIT** ♦Use bathroom scale to progress as follows:
- | | |
|---------------|---|
| Weeks 7 & 8 | PWB 1/3 Body Weight |
| Weeks 9 & 10 | PWB 2/3 Body Weight |
| Weeks 11 & 12 | FWB with crutches |
| Week 13+ | Crutch, Cane, or No Device as tolerated |
- * Progress per guidelines above as pain allows
- ROM** ♦Continue full AROM and gentle AAROM
♦CPM may be discontinued
- THEREX** ♦Low weight (max 10-20lbs.) open-chain leg extension and curl
♦Continue quad sets, SLR in brace, leg curl and heel slides
♦Strengthen quadriceps, hamstrings, and hip abductors/extensors using ankle weights and/or elastic band resistance through full ROM as tolerated
♦Stationary bicycle using unloading brace with low resistance as tolerated
♦Gentle closed-chain terminal knee extension 0-40 degrees (TKE) permitted starting at 9-10 weeks as tolerated per weight bearing restriction
- THERAPY** ♦Continue gentle multi-directional patella mobilization as needed
♦Whirlpool or pool therapy as available to enhance ROM and quadriceps/hamstring muscle control.
♦E-stim for VMO/quadriceps muscle re-education/biofeedback as needed
♦Gentle massage/deep friction to hamstring insertions, suprapatellar quadriceps, medial/lateral gutters, and infrapatellar regions.
- COMMENTS** ♦Activity level should be modified if increased pain, catching, or swelling occurs.
♦No progression of this protocol until cleared by M.D at 12 weeks post-op.