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Physical Therapy Prescription – Femoral Condyle Cartilage Restoration

Name:	Date of Surgery:
Procedure: R / L knee femoral condyle	
Frequency: 2-3 times per week for 6 weeks	

PHASE 0: Pre- operative goals (i.e. Pre-hab)

- Normal Gait
- **AROM** 0-120 degrees
- Strength: 20 SLR with no lag.
- Minimal Effusion
- Patient Education on Post op exercises with a stress on compliance and importance
- Education on ambulation with crutches and safe stair use
- Wound care instructions
 - Keep tegederm clean and dry, no showering until 48hrs post-op then remove ACE, No submerging (bath, hot-tub, lake, river, ocean) for 6 weeks post op. Formal instructions will be listed in operative note and packet.

Educated in follow-up (also provided in packet): 10-14 days post op, 6 weeks, 3 months, 6 months, 9 months, 1 year, 2 years, 5 years.

PHASE I (Weeks 0 – 6): Period of protection, decrease edema, activate quadriceps

- Weightbearing: Heel-touch weight-bearing with crutches
- Hinged Knee Brace:
 - Week 0-2: Locked in full extension for ambulation and sleeping (remove for CPM and PT)
 - o Week 2-6: Discontinue brace if able to reach terminal extension. Remain heel-touch weight bearing
- Range of Motion: Continuous Passive Motion (CPM) machine for 4-6 hours/day
 - o **CPM Protocol:** 1 cycle per minute starting 0-30°, advance 5-10°/day
 - PROM/AAROM with PT assistance
- Therapeutic Exercises: patellar mobs, quad/hamstring sets, calf pumps, passive leg hangs to 90°, heel slides, straight-leg raises with brace in full extension until quad strength prevents extension lag
- Modalities: Per therapist, including electrical stimulation, ultrasound, heat (before), ice (after)

Phase II (Weeks 6 - 8)

- Weightbearing: Advance weight bearing 25% every 3-5 days until FWB at 8 weeks
- Hinged Knee Brace: None
- Range of Motion: Progress to full, painless AROM
- Therapeutic Exercises: Continue Phase I, add stationary bike
- Modalities: Per therapist, including electrical stimulation, ultrasound, heat (before), ice (after)

Phase III (Weeks 8 – 12)

- Weightbearing: Progress to full
- Range of Motion: Full, painless
- Therapeutic Exercises: Advance Phase II, begin closed chain exercises (wall sits, shuttle, mini-squats, toeraises), begin unilateral stance activities and balance training
- Modalities: Per therapist, including electrical stimulation, ultrasound, heat (before), ice (after)
- PRECAUTION: NO Impact activities(running/jumping) until 8 months post op

Phase V (>6 months): Gradual return to athletic activity			
•	Encourage maintenance program Return to sport-specific activity and impact when cleared by MD at 8	-9 months postop	
Sig	gnature:	Date:	

Advance Phase III exercises; focus on core/glutes; advance to elliptical, bike, and pool as tolerated