

Osteochondral Allograft: Femoral Condyle

Postop	Goals	Precautions	Exercises
Weeks 0-2 HEP daily	Full passive extension Edema and pain control Promote independence	TTWB (20%) XROM Brace locked at 0° except for approved exercises Home ROM exercises 4-6 hours per day	Quad sets/SLR Calf pumps Passive leg hangs to 90° Stretches: hamstring and gastroc
Weeks 2-6 PT 1- 2x/week HEP daily	Full passive extension 120° knee flexion Prevent quad inhibition Edema and pain control Promote independence	TTWB (20%) Brace locked at 0° except for approved exercises ROM: Weeks 2-4: 0-90° Weeks 4-6: 0-120°	AA/PROM pain free Towel extension Patella mobilization Quad re-education SLR in all planes Hip/Core resisted exercises LE flexibility exercises
Weeks 6-12 PT 2- 3x/week HEP daily	Full ROM Normal gait pattern Ascend 8" step with control Normal patella mobility Improve ADL endurance	Progress WB 25% per week until full DC brace when adequate quad Avoid descending stairs reciprocally Avoid painful activities No running	Continue above exercises Gait training Closed chain activities: wall sits, mini-squats, toe raises, stationary bike, leg press 0- 60° Proprioception training Initiate step-up program
Weeks 12-20 PT 2- 3x/week HEP daily	Return to normal ADLs Improve endurance Descend 8" step with control 85% limb symmetry Improve strength/flexibility	WBAT Avoid painful activities No running Forward step down test at 4 months Isokinetic testing at 4 months	Continue and advance above Progress squat program Leg press (emphasize eccentrics) Retrograde treadmill Initiate step down program Advance to elliptical, bike, pool Open chain extension to 40°
Weeks 20+ PT 1x/week HEP daily	No apprehension with sport specific movements Maximize strength and flexibility to meet sporting demands	Avoid painful activities No running until: Strength >70% contralateral No agility training until: Strength >90% contralateral No RTP until: Passes RTP evaluation MD clearance	Continue and advance above Begin forward running Begin plyometric program