



Cartilage Repair Center

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Weight-bearing Femoral Condyle + Patellofemoral (No Osteotomy)

Autologous Chondrocyte Transplantation

Stage 2 –Transitional Phase (7-12 weeks)

PRIMARY GOALS

DO NOT OVERLOAD GRAFT

INCREASE TIBIAL-FEMORAL AND PATELLA-FEMORAL MOBILITY

RESTORE QUADRICEPS CONTROL

BRACE

- ♦Hinged knee brace discontinued once independent SLR achieved

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

- ♦AAROM AROM flexion. Only PROM extension allowed
- ♦CPM may be discontinued

THEREX

- ♦Quad sets, SLR with brace locked as needed, leg curl/heel slides, hip abduction/extension with ankle weights and/or band resistance as tolerated
- ♦Stationary bicycle without resistance as tolerated
- ♦Pool exercise using kickboard – flutter/straight leg, scissor kick only (no frog kick)
- ♦Gentle closed-chain terminal knee extension 0-40 degrees (TKE) permitted starting at 9-10 weeks as tolerated per weight bearing restriction
- ♦Permitted to begin blood flow restriction (BFR) therapy

THERAPY

- ♦Multi-directional patella mobilization as needed
- ♦Cryotherapy and ACE wrap for edema control
- ♦Pool therapy as available to enhance ROM and quadricep/hamstring muscle control
- ♦E-stim for VMO/quadriceps muscle re-education/biofeedback as needed
- ♦Massage/deep friction to hamstring insertions, suprapatellar quadriceps, medial/lateral gutters, and infrapatellar regions

COMMENTS

- ♦No resistance permitted with stationary bicycle until cleared by MD
- ♦NO active open-chain exercises
- ♦NO leg press or squatting
- ♦Activity level should be modified if increased pain, catching, or swelling occurs

For Outpatient Physical Therapist:

2-3x week / 6 weeks



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