



Cartilage Repair Center

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Weightbearing Femoral Condyle
Autologous Chondrocyte Transplantation
Stage 3 – Remodeling Phase (13+ weeks)

PRIMARY GOALS

DO NOT OVERLOAD GRAFT

INCREASE TIBIAL-FEMORAL AND PATELLA-FEMORAL MOBILITY

RESTORE QUADRICEPS CONTROL

BRACE

- ♦ No hinged knee brace required with good quad control

GAIT

- ♦ Full weight-bearing as tolerated with crutch or cane as needed/pain allows

ROM

- ♦ Full AROM

THEREX

- ♦ Resisted open-chain exercise with ≤ 20 lbs. to be progressed as tolerated after 6 months
- ♦ Closed-chain exercise to promote knee stability and proprioception through full ROM as tolerated
- ♦ Cycling on level surfaces permitted with gradual increase in tension per level of comfort
- ♦ Treadmill walking encouraged
- ♦ Elliptical machine permitted at 3 months
- ♦ Rollerblading permitted at 6-7 months

THERAPY

- ♦ Multi-directional patella mobilization as needed
- ♦ Cryotherapy for edema control
- ♦ Pool therapy as available to enhance ROM and quadriceps/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 squats, no leg presses allowed until cleared by MD
- ♦ No pivoting sports should be started until cleared by MD
- ♦ **Activity level should be modified if increased pain, catching, or swelling occurs**

For Outpatient Physical Therapist:

2-3x week / 6 weeks



ORTHOPEDIC & SPINE INSTITUTE

at St. Mary's Medical Center