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Osteochondral Autograft Transplant

Phase I (1 – 5 days post-op.)

- Wound: Observe for signs of infection. Remove dressing on post-operative day 5. OK to shower after dressing removal. Cover with gauze and wrap with an Ace Wrap.
- Gait: NWB
- Modalities: prn for pain and inflammation (ice, IFC)
- Brace: locked in full extension week 1
- ROM: CPM use for 6 – 8 hours per day beginning 0 – 40 degrees, 1 cycle/minute. Increase 5 – 10 degrees daily per patient comfort.
- Exercises: Quad sets, ankle pumps, hamstring stretching

Phase II (5 days – 4 weeks post op.)

- Wound: Continue to monitor for signs of infection and begin scar management techniques when incision is closed. Remove dressing on post-operative day 5. OK to shower after dressing removal. Cover with gauze and wrap with an Ace Wrap.
- Gait: Initiate toe touch weight bearing (20 – 30 lbs) at 4 weeks
- Modalities:
 - Ice on regular basis to control swelling
 - E-stim to increase quad contraction
 - sEMG for VMO activation
- Brace: Gradually open brace in 20 degree increments as quad control is gained.
- ROM: Continue Phase I with CPM. Goal 0 – 90 degrees at week 4
 - Bike for ROM Strengthening
- Strengthening
 - Isometric quad, SLR, hamstring, hip ab/adduction, and gluteal sets
 - Bilateral proprioceptive activities
- Mobilization/Stretching
 - PROM/AAROM to knee to meet goal
 - Patellar mobs

Phase III (4 – 10 weeks post-op)

- Wound: Continue scar management techniques
- Gait: Increase WB 25% per week; FWB at 8 weeks
- Modalities: Continue e-stim or sEMG as needed; Ice for reduction of exercise induced swelling
- Brace: Wean from brace at 6 weeks with D/C at 8 weeks
- ROM: Goal full AROM at week 8 – 10