

REHABILITATION PROTOCOL: KNEE OSTEOCHONDRAL AUTOGRAFT TRANSPLANT (OATS)

□ Phase 1 (Weeks 0-6)

- Weight bearing: Non weightbearing
- Bracing:
 - Hinged knee brace locked in extension (week 1)- remove for CPM and rehab with PT
 - Weeks 2-6: gradually open brace in 20° increments as quad control is obtained
 - Discontinue brace when patient can straight leg raise without an extension lag
- Range of motion
 - Continuous passive motion (CPM) 6-8 hours/day for 6-8 weeks
 - Set to 1 cycle per minute- start at level of flexion 40°
 - Advance 10° per day until full flexion achieved (goal of 100% by 6 weeks)
 - Passive/Active assist range of motion and stretching under guidance of PT
- Therapeutic exercises
 - Patellar mobilization
 - Quad/hamstring/adductor/gluteal sets- straight leg raises/ ankle pumps
 - Stationary bike for ROM

□ Phase 2 (Weeks 6-8)

- Weight bearing: advance to full weight bearing as tolerated- discontinue crutch use
- Range of motion
 - Advance to full/ painless ROM (goal 130°)
- Therapeutic exercises
 - Closed chain extension exercises- wall sits, shuttle, mini-squats, toe raises
 - Gait training
 - Patellar mobilization
 - Begin unilateral stance activities

□ Phase 3 (Weeks 8-12)

- Weight bearing: full
- Range of motion: full and painless
- Therapeutic exercises
 - Advance closed chain strengthening exercises, proprioception activities
 - Sport-specific rehabilitation
- Gradual return to athletic activity as tolerated
 - Jogging 3mo
 - Higher impact activities 4-6mo
- Maintenance program for strength and endurance