Rehabilitation Protocol:

Knee Osteochondral Allograft Transfer

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Orthopedic Surgeon | Sports Medicine



Name:

Signature: ____



Date: _

Date: _____

Diagnosi	s:	Date of Surgery:	
Phase I (Weeks 0-6)		
	Weightbea	aring: Non-weightbearing	
	Bracing		
	0	Hinged knee brace locked in extension (week 1) – remove for rehab with PT	
	0	Weeks 2-6: Gradually open brace in 20° increments as quad control is obtained	
	0	D/C brace when patient can perform straight leg raise without an extension lag	
	Range of M	Motion	
	0	Advance 10° per day until full flexion is achieved (should be at 100° by week 6)	
	0	PROM/AAROM and stretching under guidance of PT	
	Therapeut	tic Exercises	
	0	Patellar mobilization	
	0	Quad/Hamstring/Adductor/Gluteal sets - Straight leg raises/Ankle pumps	
Phase II ((Weeks 6-8)		
	Weightbea	aring: Partial weightbearing (25% of body weight)	
	Range of M	Range of Motion – Advance to full/painless ROM (patient should obtain 130° of flexion)	
	Therapeut	Therapeutic Exercises	
	0	Continue with Quad/Hamstring/Core strengthening	
	0	Begin stationary bike for ROM	
Phase III	(Weeks 8-12)		
	Weightbea	aring: Gradually return to full weightbearing	
	Range of Motion - Full/Painless ROM		
	Therapeut	tic Exercises	
	0	Begin closed chain exercises – wall sits/shuttle/mini-squats/toe raises	
	0	Gait training	
	0	Continue with Quad/Hamstring/Core strengthening	
	0	Begin unilateral stance activities	
Phase IV	(Months 3-6)		
	Weightbea	aring: Full weightbearing with a normal gait pattern	
	Therapeut	tic exercises	
	0	Advance closed chain strengthening exercises, proprioception activities	
	0	Sport-specific rehabilitation – jogging at 4-6 months	
•	Return to a	athletic activity – 9-12 months post-op	
	Maintenan	nce program for strength and endurance	
Commen	ts:		
Frequen	cy: 2-3 times p	per week Duration: 6-8 weeks	