



# Indiana University Health

## IU Health Physicians Orthopedics & Sports Medicine

# **CARTILAGE RESTORATION – FEMORAL CONDYLE** CARTILAGE

## PHYSICAL THERAPY PROTOCOL

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Patient Name: \_\_\_\_\_ Date of Surgery: \_\_\_\_\_

**Evaluate and Treat** 

Provide patient with home program

Frequency: x/week x weeks

## **PHASE I (Weeks 0 – 6):**

Period of protection, decrease edema, activate quadriceps



- Weightbearing: Non weight-bearing with crutches
- Hinged Knee Brace:

Week 0-1: Locked in full extension for ambulation and sleeping (remove for CPM and PT)
Weeks 2-6: Unlock brace as quad control improved; discontinue when able to perform SLR without extension lag

- Range of Motion: Continuous Passive Motion (CPM) machine for 6-8 hours/day
  - **CPM Protocol:** 1 cycle per minute starting 0-40°, advance 5-10°/day (goal is 100° by week 6)
  - PROM/AAROM with PT assistance

• **Therapeutic Exercises:** patellar mobs, quad/hamstring sets, calf pumps, passive leg hangs to 90°, heel slides, straight-leg raises with brace in full extension until quad strength prevents extension lag

• Modalities: Per therapist, including electrical stimulation, ultrasound, heat (before), ice (after)

#### Phase II (Weeks 6 - 8)

- Weightbearing: Partial (25%/wk)
- Hinged Knee Brace: None
- Range of Motion: Progress to full, painless AROM
- Therapeutic Exercises: Continue Phase I, add stationary bike
- **Modalities:** Per therapist, including electrical stimulation, ultrasound, heat (before), ice (after)

#### Phase III (Weeks 8 – 12)

- Weightbearing: Progress to full
- Range of Motion: Full, painless
- **Therapeutic Exercises**: Advance Phase II, begin closed chain exercises (wall sits, shuttle, mini-squats, toe-raises), begin unilateral stance activities and balance training
- Modalities: Per therapist, including electrical stimulation, ultrasound, heat (before), ice (after)

#### Phase IV (Weeks 12 - 24)

• Advance Phase III exercises; focus on core/glutes; advance to elliptical, bike, and pool as tolerated

### Phase V (>6 months):

Gradual return to athletic activity



- Encourage maintenance program
- Return to sport-specific activity and impact when cleared by MD at 8-9 months postop

By signing this referral, I certify that I have examined this patient and physical therapy is medically necessary. This patient \_\_\_\_\_ would \_\_\_\_would not benefit from social services.

Date:\_\_\_\_\_

Bryan M. Saltzman, MD