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Physical Therapy Prescription Osteochondral Autograft / Mosaicplasty

Patient Name: _____ **Today's Date:** _____ **Surgery Date:** _____

DOB: _____ **Sex:** _____

Dx: s/p (LEFT / RIGHT) Knee Osteochondral Autograft (OATS) / Mosaicplasty

Modalities as need for pain control

Weeks 0-4

- Strict TTWB x 4 weeks with brace locked at 0 degrees, may progress to FWB by 6 weeks
- Hinged, double-upright brace in full extension
- Quadriceps and Adductor isometrics
- SLR's into flexion, extension, abduction and adduction (AAROM→AROM)
- Passive (CPM) and AAROM (ROM limited to 0-90° knee flexion for 4 weeks)
- Manual and self-mobilizations for Hamstrings, Gastrocnemius, Hip flexors and ITB/lateral retinaculum
- Gentle Patella, fibular head and scar mobilization
- NMES for Quadriceps re-education daily
- Cryotherapy and cryokinetics for pain

Weeks 4-6

- Continue hinged, double-upright brace in full extension
- Progressive partial WB to full WB by week 6, brace still must be locked at 0 degrees
- Initiate PWB closed kinetic chain strengthening, short arc
- Continue core strength and stability
- Begin gentle Quadriceps stretching as tolerated
(Concentrating on proximal attachment – limiting knee flexion to less than 120°)
- Continue gentle Patella, fibular head and scar mobilization
- Begin proprioception exercise on stable surface

Weeks 6-12

- Discontinue Hinged, double-upright brace in full extension
- Full weight bearing
- Begin gait training and standing proprioceptive training on unstable surface
- Progress closed kinetic chain strengthening for lower extremity
- Progress OKC and CKC strengthening for hip
- Continue gentle Patella, fibular head and scar mobilization
- Continue core and hip strength and endurance

Weeks 12-24

- Continue gait training and proprioceptive training
- Progress closed and open kinetic chain strengthening for lower extremity
(Avoid hyperflexion at knee and full open kinetic chain knee extension)
- Continue lower extremity strengthening
- Begin light jogging, progress to light recreational activities by 20-24 weeks
- Continue NMES for Quadriceps re-education PRN
- Continue Cryotherapy for pain/edema/effusion PRN
- Begin agility drills in single plane, frontal and sagittal
- Pivoting to begin at 4.5 months
- Assess posture and functional movement patterns. Corrective exercise as needed.

Frequency & Duration: (circle one) 1-2 2-3 x/week for _____ weeks Home Program

**Please send progress notes.

Physician's Signature: _____ **M.D.**