



Cartilage Repair Center

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Weightbearing Femoral Condyle

Osteoarticular Transfer (OATS) PT Protocol

Stage 2 – Remodeling Phase (6+ weeks)

PRIMARY GOALS

DO NOT OVERLOAD GRAFT

INCREASE TIBIAL-FEMORAL AND PATELLA-FEMORAL MOBILITY

RESTORE QUADRICEPS CONTROL

BRACE	♦Knee immobilizer with ambulation until good quad control/independent SLR
PRECAUTIONS	♦Increase to WBAT with crutch or cane as needed/pain allows
ROM	♦Continue full AROM and gentle AAROM exercises ♦CPM may be discontinued
THEREX	♦Cycling on level surfaces permitted with gradual increase in tension per level of comfort ♦Treadmill walking encouraged ♦Low weight (max 10-20 lbs) open-chain leg extension and curl ♦Strengthen quadriceps, hamstrings, and hip abductors/extensors using ankle weights and/or elastic band resistance through full ROM as tolerated ♦Gentle closed-chain terminal knee extension 0-40 degrees (TKE) permitted starting at 9-10 weeks as tolerated per weight bearing restriction
THERAPY	♦Continue multi-directional patella mobilization as needed ♦Pool therapy as available to enhance ROM and quadriceps/hamstring muscle control ♦E-stim for VMO/quadriceps muscle re-education/biofeedback as needed. ♦Gentle massage/deep friction to hamstring insertions, suprapatellar quadriceps, medial/lateral gutters, and infrapatellar regions ♦Cryotherapy for edema control
COMMENTS	♦Activity level should be modified if increased pain, catching, or swelling occurs ♦No pivoting sports should be started until after MD clearance at 6 months

For Outpatient Physical Therapist:

1-3x week / 8-12 weeks



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