

## Cartilage Restoration Rehabilitation Protocol (Patellar Facet)

Phase	Goals	Precautions/Restrictions	Treatment
Weeks 0-6	<ul style="list-style-type: none"> <li>Protect surgical site</li> <li>Manage swelling and pain</li> <li>Achieve and maintain good quadriceps activation</li> <li>Reduce muscle atrophy</li> </ul>	<ul style="list-style-type: none"> <li>WBAT in knee immobilizer</li> <li>ROM as tolerated (Do not force)</li> </ul>	<ul style="list-style-type: none"> <li>PRICE</li> <li>Quadriceps activation and strength should be emphasized</li> <li>Knee flexion and terminal extension ROM</li> <li>Gentle stretching of hamstrings, calf to tolerance</li> <li>OKC hip strengthening in all planes</li> <li>Ok to initiate stationary biking without resistance (within ROM limitations)</li> <li>Modalities as indicated</li> <li>Initial Visit: FOTO, LEFS</li> </ul>
Weeks 6-8	<ul style="list-style-type: none"> <li>Achieve full ROM by 12 weeks</li> <li>Ambulate community distances by 12 weeks</li> </ul>	<ul style="list-style-type: none"> <li>WBAT progressing to full without immobilizer</li> <li>Progressive range of motion (Do not force)</li> <li>No impact (running, cutting, pivoting)</li> <li>Avoid excessive patellar loading (avoid deep knee flexion, knees over toes)</li> </ul>	<ul style="list-style-type: none"> <li>Begin CKC strengthening (avoid anterior knee pain)</li> <li>Limit loaded knee flexion angle to 30 degrees or less</li> <li>Normalize calf, hamstring, quadriceps mobility</li> <li>Modalities as indicated</li> <li>Week 6: FOTO, LEFS</li> </ul>
Weeks 8-12	<ul style="list-style-type: none"> <li>Achieve full ROM by 12 weeks</li> <li>Achieve full weight bearing by 12 weeks</li> <li>Wean fully from crutches</li> <li>No effusion to knee</li> <li>Restoring strength of quadriceps, hamstrings, hips</li> </ul>	<ul style="list-style-type: none"> <li>Discontinue knee brace when quad control achieved</li> <li>No impact (running, cutting, pivoting)</li> </ul>	<ul style="list-style-type: none"> <li>Progress CKC into greater ROM (&lt;90), single leg, multi-planar, and with resistance as tolerated</li> <li>Initiate proprioceptive training</li> <li>Initiate bike/elliptical for cardio fitness</li> <li>Week 12: FOTO, LEFS</li> </ul>

This protocol is not meant to be prescriptive but a recommendation to guide the rehabilitation process.  
 Each patient's progress may vary based on specifics to their injury and procedure.



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Weeks 12-24	<ul style="list-style-type: none"><li>• Preparation for more advanced exercise/activity</li><li>• Initiation of sport specific drills (per MD)</li><li>• Ready to begin impact by 6-9 months (per MD)</li><li>• Normalize asymmetries</li></ul>	<ul style="list-style-type: none"><li>• Loaded range of motion &lt;90 degrees)</li><li>• Proper exercise form and control during exercise performance</li></ul>	<ul style="list-style-type: none"><li>• Progress strength, endurance, and proprioception</li><li>• Advance cardiovascular conditioning</li><li>• Week 24: SGYM with testing<ul style="list-style-type: none"><li>○ Y- balance</li><li>○ Body weight single leg press</li><li>○ Humac testing (90/180 deg/sec)</li><li>○ FOTO, LEFS</li></ul></li></ul>
Weeks 24+	<ul style="list-style-type: none"><li>• Begin impact training once cleared by MD (jumping, running etc.)</li><li>• Unrestricted return to activity (Months 9-12)</li></ul>	<ul style="list-style-type: none"><li>• Avoid running/jumping on a painful or swollen knee</li><li>• Proper form and control during exercise performance</li></ul>	<ul style="list-style-type: none"><li>• Advance progressive exercises in all planes</li><li>• Initiate plyometric activity</li><li>• Jumping progression (double to single leg)</li><li>• Return to run program (walk/jog)</li><li>• Anticipated final visit: SGYM with testing<ul style="list-style-type: none"><li>○ Y- balance</li><li>○ Humac testing (90/180 deg/sec)</li><li>○ Single leg vertical jump</li><li>○ Single leg jump for distance</li><li>○ Single leg triple jump</li></ul></li><li>• FOTO, LEFS</li></ul>

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