**Mr Rob Gilbert**

**REHABILITATION PROTOCOL FOLLOWING FEMORAL CONDYLE MICROFRACTURE**

**Ensure patient achieves milestone prior to progression**

**Return to contact sports approximately 20 weeks post-op**

**Return to gentle non-contact, non-competitive sports at physiotherapist’s discretion but must be over 16 weeks post-op**

**Any problems during rehabilitation please contact Mr Gilbert**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **WEEK** | **RANGE OF MOVEMENT** | **MOBILITY** | **TREATMENT** | **MILESTONE TO PROGRESS** |
| Day of surgery | Immediate 0°-90° Passive ROM on CPM machine. | Touch weight bearing with EC | * Use of ice and elevation
* Ensure adequate pain relief
* Apply CPM in recovery
* Teach **passive** ROM exs to continue hourly on discharge
* Static quads
* SLR
* Circulatory exercises
 | * No post-operative complications
* Independent mobility with EC
* Good understanding of home exercise programme
 |
| Week 1-4 | No limit to passive ROM.No active quads/hams through range. | Touch weight bearing with EC | * Continue ice and elevation
* Ensure adequate pain relief
* Hourly PROM flexn/extn exs in prone/sitting using unaffected leg for support
* Heel props
* Extension mobilisations if required
* Static Qs/SLRs
* Early VMO
* Gluteal strengthening
 | * Minimal pain
* Full range extension
* SLR with no lag
 |
| Weeks 4-6 | No limit to passive ROM.Active movement limited to range that does not engage the lesion | PWB with EC | * Continue cryotherapy as required
* Continue regular PROM exs
* SLRs with resistance
* Isometric, co-contraction quads/hams in range that does not engage the lesion
* VMO/Gluteal strengthening
* Hydrotherapy if appropriate
* Proprioception exs
 | * No pain
* Minimal/no effusion
* SLR x 10 with no lag
 |
| Weeks 6-12 | No limit to AROM | FWB, no walking aids | * Exs bike with increasing resistance
* Treadmill walking
* Step ups/cross trainer/rower
* CKC/OKC hams – increase resistance as tolerated
* CKC/OKC Qs – increase resistance as tolerated
* Squats, lunges
 | * No pain
* No effusion
* Normal gait pattern
 |
| Weeks 12-16 | Full AROM | FWB | * Progress strength training – no limits
* Treadmill – commence light jogging and progress as symptoms allow
* Progress to early change of direction running
* Plyometrics
 | * No pain
* No activity related swelling
* Normal running pattern
 |
| Weeks 16-20 |  |  | * Agility/cutting/twisting
* Sport specific
 | * Symptom free sports specific training
 |
| From week 20 onwards |  |  | * Return to full competitive sport
 | * Fully fit for demands of specific sport
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