

**OATS-Osteochondral
Autograft/allograft Transfer
System**

Rehab Protocol
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Phase 1: Generally 0-6 Weeks Post-Op	
GOALS:	1) ROM: 0-90 (minimum) by two weeks post-operatively. Emphasize full extension of the knee 2) Minimize pain and swelling
PRECAUTIONS:	-Non-weight bearing weeks 0-4 -Wear brace AT ALL TIMES except during CPM use and physical therapy. - DO NOT SUBMERGE knee in water until 4 weeks post-op and incisions have fully healed
CRUTCHES:	-Use crutches for walking x 6 weeks. <ul style="list-style-type: none"> • Weeks 0-4: NWB. Your foot may touch the floor to keep you balanced, but you should not put any additional weight on the leg. • Weeks 4-6: WB is 25% of your body weight. Your therapist will teach you how to do this.
BRACE:	-You will wear the brace x 6 weeks. Range of motion is allowed and encouraged in the brace as soon as tolerated. You may remove the brace for CPM use and physical therapy.
CPM:	-Use for 4-6 hours per day at 1 cycle per minute. Begin at 0-30 degrees, after the block wears off, and increased 10 degrees per day as tolerated. Use for 4 weeks after surgery. An alternative to CPM use is active range of motion exercises (bending and straightening) 100 reps/5 times per day.
MODALITIES:	-Cryotherapy, electrical stimulation, edema control, etc.
REHABILITATION:	-ROM: Goal is to achieve full knee range of motion by 4-6 weeks. <ul style="list-style-type: none"> • Heel slides, prone hangs -Progress bilateral closed chain strengthening using resistance less than patient's body weight -Hip/Core progressive resistive exercises -Patellar mobilization emphasize superior glides -Gastroc-soleus stretch
FOLLOW-UP:	-Supervised rehab: 2-3x per week -PT re-eval: weekly -Ortho re-eval: ~2 to 4 weeks post-op

PHASE 2: Generally 6-12 Weeks Post-Op	
GOALS:	1) ROM: full/normal range of motion by this point 2) Weight bearing: Full, wean off crutches 3) Normal gait pattern, no limping
BRACE:	-None required. -May consider functional brace for activities, especially if concomitant ligament of meniscus surgery
CPM:	-Discontinued. Progress knee flexion.

REHABILITATION:	<ul style="list-style-type: none"> -Progress bilateral closed chain strengthening using resistance less than patient's body weight. -Progress to supine unilateral leg press with low weight. -Begin open chain knee strengthening -NO squats, wall slides, lunges or knee extension exercises -Begin stationary bike when knee flexion is > 110 degrees -Begin proprioception program -Continue edema control/modalities/patellar mobilization
FOLLOW-UP:	<ul style="list-style-type: none"> -Supervised rehab: 2-3x per week -PT re-eval: every 3-4 weeks -Ortho re-eval: ~12 weeks post-op

PHASE 3: Generally 12-24 Weeks Post-Op	
GOALS:	<ul style="list-style-type: none"> 1) May begin walking on treadmill 2) May begin jogging at 5-6 months
REHABILITATION:	<ul style="list-style-type: none"> -Continue all exercises from earlier protocol -Advance bilateral and unilateral closed chain exercises -Isokinetic quadriceps exercises -Progress proprioception/balance activities -Incorporate elliptical trainer and stairs at 5-6 months post-op
FOLLOW-UP:	<ul style="list-style-type: none"> -Supervised rehab: 2-3x per week -PT re-eval: every 3-4 weeks -Ortho re-eval: ~24 weeks post-op

PHASE 4: Generally 24 Weeks Post-Op	
GOALS:	<ul style="list-style-type: none"> 1) Progress slowly through lateral movement exercises 2) Sport-specific training without pain or swelling 3) Mitigate future injury risk
PRECAUTIONS:	<ul style="list-style-type: none"> - NO PARTICIPATION in sports or physically demanding military schools until cleared for return to sport by the rehabilitation team
REHABILITATION:	<ul style="list-style-type: none"> -Continue advanced strengthening <ul style="list-style-type: none"> • Full arc progressive resistance exercises-emphasize quads -Progress treadmill/swimming program -Progress plyometrics program -Progress sport training program -Progress neuromuscular/functional program -Agility drills
RETURN TO SPORT:	<ul style="list-style-type: none"> -You need to be cleared by Ortho Surgeon and your physical therapist/athletic trainer -In general return to sports and cutting activities is allowed after the patient achieves adequate flexibility, strength and endurance of the knee that is equal to at least approximately 90% of the other side and there is full incorporation of the graft. This generally is allowed around 9-12 months after surgery.

These guidelines were created as a framework for the post-operative rehabilitation program. They DO NOT substitute for any specific restrictions or requirements that are determined through the necessary shared decision-making and collaboration between the operating surgeon and treating rehabilitation team.