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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 Jo Armstrong at Wrightington Physiotherapy Department 01257 256533

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	<ul style="list-style-type: none"> • 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 	<ul style="list-style-type: none"> • 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	<ul style="list-style-type: none"> • 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 	<ul style="list-style-type: none"> • 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	<ul style="list-style-type: none"> 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 	<ul style="list-style-type: none"> No pain Minimal/no effusion SLR x 10 with no lag
Weeks 6-12	No limit to AROM	FWB, no walking aids	<ul style="list-style-type: none"> 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 	<ul style="list-style-type: none"> No pain No effusion Normal gait pattern
Weeks 12-16	Full AROM	FWB	<ul style="list-style-type: none"> Progress strength training – no limits Treadmill – commence light jogging and progress as symptoms allow Progress to early change of direction running Plyometrics 	<ul style="list-style-type: none"> No pain No activity related swelling Normal running pattern
Weeks 16-20			<ul style="list-style-type: none"> Agility/cutting/twisting Sport specific 	<ul style="list-style-type: none"> Symptom free sports specific training
From week 20 onwards			<ul style="list-style-type: none"> Return to full competitive sport 	<ul style="list-style-type: none"> Fully fit for demands of specific sport

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