






## Osteochondral Autograft Transplantation (OATS) of the Knee (Medial or Lateral Femoral Condyle) Rehabilitation Protocol

	Weight-bearing	Brace	Range of Motion	Exercises
<b>Phase 1</b> 0-2 weeks	Toe Touch weight bearing for balance only	<b>0-2 weeks:</b> Locked in full extension at all times  May unlock for ambulation when able to perform a straight leg raise and range painless ROM from 0-90°  Discontinue after 2 weeks	As tolerated, goal 0-90° @ first post-op visit	Calf pumps, patellar mobilization, quadriceps tightening sets and SLR  Add side-lying hip and core, advance quadriceps and hamstring sets  Advance core work with hip, gluteal and core strengthening
<b>Phase 2</b> 2-6 weeks	If posterior condylar lesion or a patellofemoral lesion, partial weightbearing is allowed at 2 weeks.  If recipient site is located antero-central, partial weightbearing is allowed at 2 weeks for a small defect, 3 weeks for a medium-sized defect, and at 4 weeks for a large defect.	None	Maintain full extension and progress flexion	Gait normalization with closed chain activities: wall sits, shuttle, mini-squats, toe raises.  Advance core work with hip, gluteal and core strengthening  Begin unilateral stance activities and balance training
<b>Phase 3</b> 6-12 weeks	Full	None	Full	Progress Phase II exercises and functional activities: walking lunges, planks, bridges, Swiss ball, half-Bosu exercises  May advance to bike, elliptical, pool as tolerated.
<b>Phase 4</b> 3-6 months	Full	None	Full	Advance core work with hip, gluteal and core strengthening  Advance non-impact activity.  No running, jumping, pivoting, or sports participation unless cleared by MD (after 3-4 months)

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SLR – Straight-leg raise