



## Rehabilitation Protocol: Microfracture of the Femoral Condyle

### Phase I (Weeks 0-6)

- **Weightbearing:** – No Bracing Required
  - o Non weightbearing week 0-2
  - o Toe Touch weightbearing week 3
  - o Progress to 75% partial WB by week 6
- **Range of Motion** – Full passive motion **without** weightbearing
  - o May start on a stationary bike **without** resistance at 5-7 days post-op
  - o Passive Range of Motion and stretching under guidance of PT
- **Therapeutic Exercises**
  - o Quadriceps/Hamstring isometrics
  - o Heel slides

### Phase II (Weeks 6-12)

- **Weightbearing:** Advance to full weightbearing as tolerated -- discontinue crutch use
- **Range of Motion** – Advance to full/painless ROM
- **Therapeutic Exercises**
  - o Closed chain extension exercises
  - o Hamstring curls
  - o Toe raises
  - o Balance exercises
  - o Begin use of the stationary bicycle/elliptical with light resistance
- May participate in Low impact sports (cycling, golf) after 6-8 weeks

### Phase III (Weeks 12-24)

- Goals:
  - o Improve muscular strength/endurance
  - o Increase functional activities
  - o Gradually increase loads applied to joint
  - o Control compression and shear forces
- **Weightbearing:** Full weightbearing
- **Range of Motion** – Full/Painless ROM
- **Therapeutic Exercises**
  - o Advance closed chain strengthening exercises, proprioception activities
  - o Sport-specific rehabilitation
- Gradual return to athletic activity as tolerated
- Moderate impact sports (jogging, tennis, aerobics) until 12 weeks
- No high impact jumping/cutting/pivoting sports (basketball, soccer, volleyball) until 16 weeks
- Maintenance program for strength and endurance