

Knee chondroplasty microfracture - Rehabilitation protocol

0-6 weeks

- Rest, ice, compress, elevate
- Debulk dressings day 1 post-op, to underlying simple dressings, and cover with double tubigrip
- **Patellofemoral lesions:** Weight bearing as tolerated in brace 0-30deg
- **Tibiofemoral lesions:** Non-weight bearing 6wks. No Brace needed
- **All lesions:** Full ROM out of brace when not weight bearing
- Aim to be upright for only 5 minutes per hour
- Remove brace at all other times and work on NWB flexion exercises (ROM as tolerated)
- Stationary bicycling with no resistance. Aim for 45min per day if able
- Quadriceps activation – static quads & SLR; stop if pain experienced
- Passive range exercises (heel hangs and 0-90 flexion with gravity)
- Wound review in outpatients at 2 weeks
- Commence light duties work from 1 week if safe and able

6-12 weeks

- **Patellofemoral lesions:** Weight bearing as tolerated. Unlock brace and wean off as tolerated
- **Tibiofemoral lesions:** Progress to full weight bearing as tolerated
- Full active knee range of motion
- Can drive a car
- Stationary bicycling: increase resistance and endurance
- Begin squats exercises and seated leg press (avoid until 3months with patellofemoral lesions)

3-4 months

- Continue previous exercises with progressive resistance
- Begin running program and non-impact sports
- Patellofemoral lesions can begin squats and seated leg press
- Return to heavy duties work

4+ Months

- Continue to increase lower extremity strength and endurance
- Advance running program
- Begin agility and plyometric training
- Return to sports that involve contact, cutting, pivoting or jumping