

Microfracture Procedure (Femoral Condyle) Regular (Medium-Large Lesion) Rehabilitation Program

I. PHASE I: PROTECTION PHASE:

Goals: Reduce swelling and inflammation

Protect and promote healing articular cartilage Restoration of full passive knee extension Gradual restoration of knee flexion

Re-establish voluntary quadriceps control

Weeks 0-2

Brace: Use elastic wrap to control swelling and inflammation

Weight Bearing: Non weight-bearing week 0-2

Use of crutches to control weight bearing forces

Inflammation Control:

Use of ice and compression 15-20 min. (6-8 times daily)

Range of Motion: Immediate motion

Full passive knee extension

Passive and active assisted knee flexion (3-5 times daily) to

promote articular cartilage healing

Week one: 0-900 or beyond (to tolerance)
Week two: 0-1050 or beyond (to tolerance)
Flexibility exercises: stretch hamstrings, calf & quads

Strengthening Exercises: Isometric quadriceps setting

Straight leg raises (4 directions)

Multi-angle quadriceps

Electrical muscle stimulation to quads

Bicycle when ROM permits

Proprioception and balance training

Functional Activities: Gradual return to daily activities

Monitor swelling, pain and loss of motion

Weeks 3-4

Weight Bearing: Toe-touch WB week 3

25% WB week 4

Weight bearing crutches

Range of Motion: Gradually progress knee flexion

Week 3: 0-115/1250 Week 4: 0-125/1300+ Maintain full passive knee extension

Continue stretches for quadriceps, hamstrings, gastroc Perform active assisted and active ROM (4-5 times daily)

Strengthening Exercises: Bicycles (1-2 times daily)

Low intensity bicycle - longer duration



Quads setting Straight leg flexion Hip abd/adduction Hip flexion/extension Light hamstring curls

Pool program (once incisions are closed)

Proprioception and balance training No OKC resisted knee extension

Inflammation Control: Continue use of ice, elevation and compression (4-5

times daily)

Functional Activities: Gradually return to functional activities.

No sports or impact loading

II. PHASE II: INTERMEDIATE PHASE (WEEKS 5-8):

Goals: Protect and promote articular cartilage healing

Gradually increase joint stresses and loading Improve lower extremity strength and endurance

Gradually increase functional activities

Weight Bearing: 50% WB week 6

75% WB week 7

FWB as tolerated week 8

Flexibility Exercises: Continue stretching hamstrings, quadriceps, and calf

Strengthening Exercises: Initiate functional rehab exercises

Mini-squats & leg press week 6

Closed kinetic chain exercises (step-ups, lunges) week 8

Vertical squats, wall squats, leg press

Bicycle, elliptical (low intensity long duration)

Initiate progressive resistance exercise* (PRE's)

Hip abd/adduction, extension/flexion Hamstring strengthening (light)

Pool program

Initiate walking program* (light walking) Proprioception and balance training

Functional Activities: Gradually increase walking program

*Progression based on monitoring patient swelling, pain

and motion

III. PHASE III: LIGHT ACTIVITY PHASE (WEEKS 8-16):

Goals: Improve muscular strength/endurance

Increase functional activities

Gradually increase loads applied to joint Control compression and shear forces

Criteria to Progress To Phase II:

- 1) Full non-painful ROM
- 2) Strength within 20% contralateral limb
- 3) Able to walk 1.5 miles or bike for 20-25 minutes without symptoms



Exercises:

Continue progressive resistance exercises Continue functional rehabilitation exercises

Balance and proprioception drills

Bicycle and elliptical

Neuromuscular control drills

Initiate light running program

**Physician will determine

Continue all stretches to lower extremity

Functional Activities: Gradually increase walking distance/endurance

Pool running week 10 Light running week 12-16

Progress running program week 16-18

Progression based on monitoring patient's swelling, pain, and

motion*

IV. PHASE IV: RETURN TO ACTIVITY PHASE (WEEKS 16-26):

Goals: Gradual return to full unrestricted functional activities

*Actually timeframes may vary based on extent of injury and surgery

*Physician will advise rate of progression

Exercises:

Continue functional rehab exercises

Continue flexibility exercises

Restrict with deep squatting with resistance and heavy knee extensions

Monitor jumping activities closely

Functional Activities:

Low impact sports (cycling, golf) weeks 6-8

Moderate impact sports (jogging, tennis, aerobics) weeks 12-16 High impact sports (basketball, soccer, volleyball) weeks 16-26

* Actual return to sports or strenuous will be determined by your Physician & Rehabilitation Team