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Physical Therapy Prescription – Femoral Condyle Microfracture

Name:	Date:
Procedure: R / L	Date of Surgery:
Frequency: 2-3 times per week forweeks	
PHASE I (Weeks 0 – 6): Period of protection, decrease eden	na, activate quadriceps
extension lag • Range of Motion: Continuous Passive Motion (CPM)	lation and sleeping (remove for CPM and PT) aproved; discontinue when able to perform SLR without I) machine for 6-8 hours/day -40°, advance 5-10°/day (goal is 100° by week 6) ring sets, calf pumps, passive leg hangs to 90°, heel until quad strength prevents extension lag
 Weightbearing: Partial (25%) Hinged Knee Brace: None Range of Motion: Progress to full, painless AROM Therapeutic Exercises: Continue Phase I, add station Modalities: Per therapist, including electrical stimular 	
Phase III (Weeks 8 – 12)	
 Weightbearing: Progress to full Range of Motion: Full, painless Therapeutic Exercises: Advance Phase II, begin cloraises), begin unilateral stance activities and balance Modalities: Per therapist, including electrical stimular 	
Phase IV (Weeks 12 – 24)	
Advance Phase III exercises; focus on core/glutes; ad	dvance to elliptical, bike, and pool as tolerated
Phase V (>6 months): Gradual return to athletic activity	
 Encourage maintenance program Return to sport-specific activity and impact when clear 	ared by MD at 8-9 months postop