

Sabrina Strickland, MD
Hospital for Special Surgery
523 East 72nd Street
2nd Floor
New York NY 10021-4099

MACI2 CONDYLE GUIDELINES

	WEIGHT BEARING STATUS	POST OP BRACE	RANGE OF MOTION	THERAPEUTIC GOALS	PATIENT'S CHECKLIST
Week 1-6	Crutches NWB with foot rest on the ground for balance when standing.	Yes Locked in extension when walking. Remove while sleeping after 1-2 weeks.	Full Remove brace for range of motion Goal: 90-120 degrees by 6 weeks Focus on regaining full extension CPM 0-30 degrees advance 10 degrees weekly until 90 degrees x 6 weeks	Emphasize patient compliance to home exercise program and weight bearing precautions/progression Avoid pain with therapeutic exercise & functional activities Quad muscle reeducation Patellar mobilization Exercises: Quad sets, heel slides, ankle pumps, gravity assisted knee flexion. No open chain knee extension, no SLR	<ul style="list-style-type: none"> ○ Bandages should be left on through 1st post op appointment. If bloody or suspect infection call the office immediately. ○ Take Aspirin or Xarelto daily x 30 days ○ Bruising and swelling is normal, it may travel to the ankle. Elevate the leg when laying, perform ankle pumps. ○ Apply ice/Gameready 4-6 times/day, 20min on/60min off. ○ Start Physical Therapy the first week after surgery - should continue through 6 months or as advised by physician.
Week 7-12	WBAT Progress to full WB	Taper off Unlock brace when good quad control achieved.	Full	PT/HEP: LE strength progression within parameters from PT/physician. No open chain knee extension, no SLR Continue/normalize phase I exercises as appropriate Patellar mobilization Stationary bike	<ul style="list-style-type: none"> ○ Patients are responsible for understanding the individual insurance coverage for PT.
Week 13+				Emphasize patient compliance to maintenance strength program Avoid pain with therapeutic exercise & functional activities.	

				No open chain knee extension until at least 6 months	
9 mos				<p>Avoid running until adequate strength development and as advised by your PT and/or physician.</p> <p>Recommend Quality Movement</p> <p>Screen for return to sport</p>	<p>Activity level should be modified if increase in pain or swelling occurs</p> <p>Limit activity with excessive compressive forces – jumping, high impact</p>