

**Grant H Garcia, MD**  
2409 North 45<sup>th</sup> Street,  
Seattle, WA 98103  
Wallingford: 206-633-8100  
Ballard: 206-784-8833



## **Patello-Femoral Replacement Rehab Protocol**

**Description of Procedure:** A bone and joint sparing resurfacing technique. The affected arthritic cartilage and a small amount of underlying bone in the patellofemoral compartment are removed and then replaced with metal (trochlea) and plastic (patella) components with attention to soft tissue balancing and alignment.

**Safety Warning:** Quadriceps weakness may persist many days. Until full quadriceps function is present, collapse and fall are risks to be avoided.

### **Phase I (Weeks 0 to 6)**

**Weight Bearing:** Weight bearing as tolerated once a straight leg raise can be performed without extension lag with the use of two crutches

- Progress to one crutch as tolerated then full weight bearing with normalized gait pattern; no limping

**Brace:** Brace is worn when ambulating until independent straight leg raise can be performed without extension lag

**Range of Motion: Goal:** To achieve active range of motion as soon as tolerated

#### **Therapeutic Exercise**

1 to 4 Days

• Prone hangs, heel props, heel slides, quad sets, straight leg raises (SLR), hamstring isometrics; complete exercises in brace if quad control is inadequate

• Core proximal program

• Normalize gait

• Functional electrical stimulation (FES) biofeedback as needed standing, with two crutches for support

• Perform mini dips (0 to 20 degrees)

• Progress from majority of weight on non-operative extremity to operative extremity

4 Days to 2 Weeks

• Continue heel props and prone hangs

• Begin wall slides and mini dips to 30 degrees in brace

2 to 4 Weeks

• Incorporate use of stationary bike (high seat, low resistance) and patellar mobilization exercises after suture/staple removal

4 to 6 Weeks

• Maintain full range of motion (ROM)

• Continue core exercise program

• Stationary bicycle

• Proprioceptive training

• Continue patellar mobilizations

### **Phase II Week 6-12:**

**Weightbearing:** Full

**Brace:** None

**ROM:** Full

#### **Therapeutic Exercise:**

Continue with previous or modified versions of previous exercises, but may add:

• Wall squats

• Increase weight with leg raises up to 5#

• Walking program – begin at ¼ mile and gradually increase

- Upper body machines
- For cardiovascular fitness – elliptical, walking outside or on a track, aquatic exercise, cycle. PF protection still needs to be followed.
- Golf – may begin chipping or putting at 6 weeks, driving at 3 months, and then slowly progress into a full game

**Phase III 3 months +:**

**Weightbearing:** Full

**Brace:** None

**ROM:** Full

**Therapeutic Exercise:**

Continue with previous or modified versions of previous exercises, but may add:

- Begin using leg weight machines
- Recommended activities – elliptical, cycle, walking, aquatic exercise, low impact aerobics, yoga, tai chi, Theraball exercises

*\*\*Return to all sports by 4+ months, focused sports specific exercises can begin at 3 months.*