

OATS and Arthroscopic Microdrilling Surgery

Postoperative Rehab Protocol for Physical Therapists

Phase I: 0-2 weeks

- Non-weightbearing (NWB) in a boot with crutches / scooter
- Gentle quad sets

Phase II: 2-4 weeks

- Continue NWB in a boot with crutches / scooter
- Ankle pumps (dorsi and plantarflexion) - 20 minutes per day
- Continue gentle quad sets

Phase III: 4- 6 weeks

- Partial weightbearing (PWB) ⇒ Weightbearing as tolerated (WBAT) ⇒ Full weight bearing (FWB) (Increase by 10% of body weight per day) Still in boot
- Elevated active dorsi and plantar flexion – twice per day for 20 minutes
- Advance ambulation from crutches / scooter to wide base quad cane (WBQC) ⇒ single point cane (SPC)
- Begin supervised PT at the 6-8 week mark

ANKLE PT:

- Gentle stretching / Assisted active range of motion (AAROM) on all planes
- Bilateral ankle rocker for assisted dorsi and plantar flexion
- Open kinetic chain (OKC) and closed kinetic chain (CKC) gentle range of motion (ROM) exercises
- Isometric exercises for plantar flexion, dorsi flexion, inversion, and eversion
- Seated towel / toe crunches and push aways
- Stationary bike for ankle ROM
- Leg elevation with ankle pumps ⇒ gentle retrograde / soft tissue mobilization (STM)
- Proprioceptive basics: sitting wobble board, standing weight shifts, and standing on NMR pads
- Gait training: restoration of proper stance, cadence foot placement, ↓ walking aid
- Electrical Stimulation / Ice for edema control
- Functional Electrical Stimulation for peroneal / posterior tibialis recruitment as needed
- Home exercise program: continue ankle dorsi and plantar flexion exercises, improve gait technique

KNEE PT:

- Patellar mobilizations
- Isometric quad, hamstring, and adduction exercises
- Gentle AAROM knee flexion / heel slides
- Gentle hamstring and calf stretching
- Single leg raises (SLR): flexion, extension, adduction
- Electrical Stimulation / Ice for edema control

- Functional Electrical Stimulation for quad recruitment as needed
- Home exercise program: Quad sets, SLR, heel slide

Phase IV: Week 6-10 GOALS:

- Wean brace as directed by surgeon and restore FWB with proper gait and safety on level surfaces, ramps and steps – SPC only as needed
- Restored ROM to knee and ankle
- Improved proprioceptive capabilities
- Improve knee and ankle strength

ANKLE / KNEE

- Theraband strengthening exercises: dorsi flexion, plantar flexion, inversion, eversion
- Mini squats, toe raises – bilateral and unilateral
- Continue with bike
- Continue with 4-way SLR and progress to isotinetics slowly
- Short arc quad (SAQ), long arc quad (LAQ) isotonic
- Hamstring curls – progress to isokinetics
- Strength training ⇒ endurance building with ↑ sets of 10 reps
 - Initiate isokinetics: quads, hamstrings, hip adduction, hip abduction, leg press
- Proprioceptive training:
 - Single leg standing (SLS) – with support, without support, eyes open, eyes closed
 - Standing on NMR pads with weight shifts different densities – eyes open, closed with and without support
 - Seated wobble unilateral
 - Static BOSU - dome up – advance as skill and function allow
 - Dynamic BOSU – dome up – as skill and function allow
 - Proprioceptive star – toe touches and narrow based lunges
 - Week 10: step ups forward, laterals, step overs, step backs
- Weeks 10-12: cariocas, backward, tandem walking
- Mobilizations and modalities as needed
- Continue home exercise program

Phase V: After 12 week GOALS

- Stabilize ROM knee and ankle
- Restore gait to complete independence without assistance
- Restore balance with safety and confidence

ANKLE / KNEE

- ↑ strength and endurance
- Pool exercises when season makes available
- Progress to advanced balance and proprioceptive challenges on BOSU, wobble board
- Add basic plyometrics to complete NMR training
- Mobilizations and modalities as needed
- Continue home exercise program