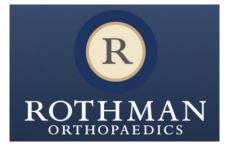
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High Tibial Osteotomy/Distal Femoral Osteotomy Physical Therapy Protocol/Prescription

Patient Name:_____

Surgery: s/p Right/Left Distal Femoral Osteotomy High Tibial Osteotomy

Date of Surgery:_____

Frequency: 1 2 3 4 times/week Duration: 1 2 3 4 5 6 Weeks

WEEKS 0-2

- ____ Full Extension in Bledsoe Brace locked @ 0 degrees
- ____ Ambulate NWB with Bledsoe Brace locked @ 0 degrees
- ____ Cryotherapy prn
- ____ Passive ROM 0 90 degrees
- ____ Calf pumps, quad sets SLR in brace, modalities

WEEKS 2-6

- Progress ROM in Bledsoe to 0 60 degrees as Quad tone and strength increase over 6 week period
- ____ Ambulate TTWB in Bledsoe Brace
- Passive ROM 0 120 degrees MAX (Active Flexion / Passive Extension) NO ACTIVE EXTENSION
- ____ Straight Leg Raises (in Bledsoe) / Quad Sets
- ____ Quadriceps Isometrics @ 90 degrees
- _____Biofeedback Unit (E-stim to Quads may be used if Biofeedback not available)
- _____Begin floor-based core, hip and glutes work Advance quad sets, pat mobs, and SLR

WEEK 6 AND BEYOND

- ____ Advance 25% weight bearing weekly and progress to full with normalized gait pattern
- ____ Advance assistive device as tolerated Crutches > Cane > None
- ____ Out of Bledsoe once adequate quadriceps control
- ____ Begin Active Extension
- ____ Continue SLR, Quad Isometrics
- ____ Begin stationary bike at 6 weeks
- ____ Outdoor cycling, elliptical, swimming after 12 wks
- ____ Modalities prn
- ____ Advance closed chain quads, progress balance, core/pelvic and stability work
- ____ Advance SLR, floor-based exercises, hip/core
- ____ Begin training sport-specific drills as tolerated after 20 weeks

Functional Capacity Evaluation			Work Hardening/Work Conditioning			X Teach HEP		
X	_Electric Stimulation	Ultrasound	Iontophoresis	Phonophoresis	TENS	X_	_ Heat before	

_X__Ice after ___Trigger points massage __X__ Therapist's discretion

Signature__

Date