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Knee Osteotomy Postoperative Protocol

<u>Postop</u>	<u>Goals</u>	<u>Precautions</u>	<u>Exercises</u>
Weeks 0-6 PT 1-2x/week HEP daily	Full passive extension ROM 0-120 Patella mobility Edema and pain control SLR without lag Promote independence	Weeks 0-4: TDWB (20%) Brace at 0° for ambulation Limit knee flexion: 0-90° Brace locked at 0° for sleep Weeks 4-6: PWB (50%) Brace open 0-60° for ambulation with crutches abiding with WB restrictions Brace locked at 0° for sleep	A/AA/PROM emphasize extension Patella mobilization Quad re-education and SLR Hip/Core training Short crank ergometry (ROM>85°)
Weeks 6-12 PT 2-3x/week HEP daily	Full ROM Normalize patella mobility Edema and pain control Improve quad control Promote independence	Progress to WBAT DC brace when able to do straight leg raise without lag	AAROM knee flexion/extension Standard ergometry (ROM>115°) Quad re-education Proprioceptive training Hip/Core training Bilateral leg press 0-60°
Weeks 12-16 PT 1-2x/week HEP daily	Full ROM Descend 8" step with control Improve endurance Protect patellofemoral	WBAT Avoid Painful Activities No running	Progress squat/leg press Closed chain strengthening Forward step-up/down program Advance proprioceptive training Elliptical, retrograde treadmill
Weeks 16-24 PT 1-2x/week HEP daily	Symptom free running Improve strength/flexibility Hop Test >85% limb symmetry	Avoid painful activities 4 months: Low-impact sport allowed (golf, swimming, skating, hiking rollerblading, and cycling) 5-6 months: Moderate-impact sports allowed (jogging, running, aerobics) 6-8 months: High-impact sports allowed (tennis, basketball, football, and baseball)	Progress squat program <90° flexion Forward running program at 5 months (when 8" step down OK) Advance agility program Plyometrics when sufficient base
Weeks 24+ PT 1x/week HEP daily	No apprehension with sport specific movements Strength and flexibility to meet sporting demands	Avoid painful activities No sport until MD clearance	Advance flexibility/agility/plyometrics Sport specific training