Dr. Ernat's HTO or DFO Post-Operative Protocol

May attend up to 1-3 times weekly for 12-16 weeks.

Timing of each phase varies based on individual patient factors, length of time immobilized, strength/ROM status, and expected performance/activity demands.

PHYSICAL THERAPY (PT): Begin after first post-op visit, about 2 weeks after surgery.

RESTRICTIONS: Gentle ROM first week as tolerates. May immediately progress to ROM as tolerated pending wound healing and pain control.

WB / CRUTCHES (OPENING WEDGE PROCEDURE): TTWB 6-8 weeks with brace locked in extension and crutch assistance until cleared by Dr. Ernat. Wean crutches by 6-8 weeks pending X-ray evidence of healing.

WB / CRUTCHES (CLOSING WEDGE PROCEDURE): TTWB 2 weeks with brace locked in extension and crutch assistance. After 2 weeks may progress with WBAT with brace in extension. Wean crutches and unlock brace by 4-6 weeks pending patient tolerance.

BRACE: ROM brace - anticipate brace use for minimum 6-12 weeks post-operatively pending progression, radiographs, body mass index, and procedure performed.

RANGE OF MOTION: Gentle ROM week 1 and then progress to full ROM as tolerated there after.

STRENGTHENING: Quad sets and SLR immediately in brace. No true strengthening until around 10-12 weeks.

MODALITIES:

Per PT or ATC's discretion. Ice use 3-5 x/day first 10-14 days then 2-3 x/day wks 1-4 as needed.

RETURN TO ACTIVITY: subject to change, based on individual progress

Recumbent bike: 8 weeks

Elliptical: 10 weeks Planks: 10 weeks Swimming: 10 weeks

Road bike outside: 10 weeks Light jogging: 4 months Running: 5-6 months Golf (chip/putt): 4 months Golf (full swing): 4 months

Skiing: 6 months Tennis: 6 months Soccer: 6 months Basketball: 6 months

Contact sports: 6 months

PHASE I: PROTECTION / RANGE OF MOTION (POST-OP - 1 WEEK)

- · Control pain and swelling, decreased effusion, wound healing.
- Rest, ice, compression, elevation 3-5 x/day or more as needed to help decrease pain and swelling.
- · Gain full extension.
- · Gluteal sets, quad sets, SLR. Hip abduction and adduction.
- 1) Home exercise program to be performed 3-5 times daily.

PHASE II: RANGE OF MOTION / LIGHT RESISTANCE (POST-OP WKS: 2-8)

- · Pain management and control of effusion.
- · Increased range of motion (ROM) as tolerates.
- Neuromuscular re-education of quadriceps.
- · 7-8 weeks may begin walking on an underwater treadmill.
- · Upper extremity reaches and core, flexibility exercises.
- · Modalities per therapist discretion.
- · Home exercise program to be performed 3-5 times daily.

PHASE III: STRENGHTENING (POST-OP WKS: 8-16)

- NO pivoting, agility, twisting.
- 8 weeks: recumbent/stationary bike
- · Good guad recruitment and normal gait, SLR without lag.
- · Absence of pain, no effusion or edema.
- · Full passive, active ROM, normal knee ROM.
- · Progression of quad strength exercises and closed kinetic chain exercises.
- Closed chain double leg & single leg strength as tolerated, mini-squats, step-ups, toe raises, total gym as tolerated.
- · Quadriceps/hamstring isometrics. Standing balance training. Isokinetic exercises.
- Improved stability with unilateral stance. Equal hip, glute and core strength bilaterally.
- Returned to full or near full participation in simple activities of daily living.
- · Preparation for advanced exercises.
- 12 wks: Leg press, step-downs, lateral step-ups.
- 12 wks: Strength, endurance, proprioception and flexibility exercises.
- 12 wks: Swimming, stair master, mini squats, cycling, NordicTrack.

PHASE IV: RETURN TO ACTIVITY (POST-OP WKS: 16+)

- 16+ wks: Initiate running and cutting programs
- · Increased strength, power, flexibility, endurance.
- · Agility drills, plyometric training and sport-specific drills.
- Preparation for return to full unrestricted activities.
- · Satisfactory clinical exam, full confidence in knee and pain free activity by 5 months.
- · Functional testing at least 90% of contralateral leg
- · Isokinetic testing at least 90% of contralateral leg

KEY FOR PATIENTS:

POST-OP = after your surgeryWB = weight-bearingROM = range of motion

PROM = passive range of motion, someone else moves you

AAROM = active assisted range of motion

AROM = active range of motion, you move yourself

RROM = resisted range of motion, motion against resistance, strengthening

SLR = straight leg raise

WNL = within normal limits