



Indiana University Health

IU Health Physicians Orthopedics & Sports Medicine

HIGH TIBIAL OSTEOTOMY (HTO) / DISTAL FEMORAL OSTEOTOMY (DFO)

PHYSICAL THERAPY PROTOCOL

Bryan M. Saltzman, M.D.

Chief, Division of Sports Medicine & Shoulder/Elbow Surgery

Indiana University Health Physicians

Assistant Professor of Orthopaedic Surgery, Indiana University

Sports Medicine, Cartilage Restoration, Shoulder/Elbow Surgery

IU Health Methodist Medical Plaza North (MSK) – 201 Pennsylvania Pkwy #100,
Carmel, IN 46280

IU Health Methodist Hospital – 1801 N Senate Ave, Indianapolis, IN 46202
317-944-9400

www.bryansaltzmanmd.com

Patient Name: _____ **Date of Surgery:** _____

____ **Evaluate and Treat** ____ **Provide patient with home program**

Frequency: _____ x/week x _____ weeks



<u>Postop</u>	<u>Goals</u>	<u>Precautions</u>	<u>Exercises</u>
Weeks 0-8 PT 1-2x/week HEP daily	Full passive extension ROM 0-90° Patella mobility Edema and pain control SLR without lag Promote independence	Weeks 0-4: NWB Brace at 0° for ambulation & sleep Limit knee flexion: 0-90° Weeks 4-8: TTWB (20%) Brace open 0-60° for ambulation with crutches abiding with WB restrictions Brace locked at 0° for sleep Limit knee flexion to 120°	A/AA/PROM emphasize extension Patella mobilization Quad re-education and SLR Hip/Core training Short crank ergometry (ROM>85°)
Weeks 8-12 PT 2-3x/week HEP daily	Full ROM Normalize patella mobility Edema and pain control Improve quad control Promote independence	Advance WB 20% per week so that patient is WBAT by 12 weeks DC brace for ambulation with crutches abiding with WB restrictions	AAROM knee flexion/extension Standard ergometry (ROM>115°) Patella mobilization 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 No running	Progress squat/leg press 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, 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

By signing this referral, I certify that I have examined this patient and physical therapy is medically necessary. This patient ___ would ___ would not benefit from social services.

Date: _____

Bryan M. Saltzman, MD