TIBIAL SPINE FRACTURE FIXATION PROTOCOL

First Visit

- PT removes bandages on POD #3, keep steri-strips intact until Dr Babb can remove them.
- No ointments, betadine etc should be used on the incisions or portals.
- If any drainage/oozing is present recover with 4x4’s, and notify Dr Babb (may need antibiotics).
- **No ice bags** on any oozing or open wounds without being covered first with a bandage.
- If any wounds are oozing delay range of motion until wounds are closed and healed.
- **No water on wounds** for 2 weeks (including showers) even if covered, no submersion of wounds in water (baths) until wounds are scars.
- **Brace**: locked in extension for 4 weeks post op
- Ambulation: FWB

Day 1- Day 27 Post-op

- **Brace: locked in extension**
- **Ambulation**: FWB
- **ROM**:
  - PROM: 0°-90°
  - Patient may remove brace twice daily to allow PROM through 0-90°
  - Heel slides
  - Gastroc/soleus/hamstring stretching
- **Strengthening**:
  - SLR- all planes
  - Quad sets
  - Hamstring curls
  - Ankle 4-way

Day 28-41 Post-op

- **Brace**: Open to allow full motion
- **PROM**: Full
• **AROM:** Full
• **Strengthening:**
  - Total Gym/Vigor Gym
  - Recumbent bike
  - Continue progressing previous strengthening activities

### 6 Weeks Post-op

• **Brace:** sports brace dispensed
• **ROM:** Full
• **Strengthening:**
  - Progress double leg closed-kinetic chain strengthening
  - Continue progressing previous strengthening activities
  - Focus on proprioception training

### 9 Weeks Post-op

• **Strengthening:**
  - Single leg Closed-Kinetic Chain strengthening
  - Continue progressing previous strengthening activities

### 3 Months Post-op

• **Straight ahead running**
  - Start with 100 yds at half speed on soft level surface
  - Add 100 yds every other day
  - Work up to 1 mile or 1760 yds
• **Gentle lateral movements:**
  - Defensive slide
  - Floor ladder
  - Figure 8’s
  - Carioca’s
• **Transverse plane movements:**
  - Pivots
  - Steps with rotation
• **Low level plyometrics:** stationary jumps, hops, skipping rope. Refer also to MAO plyometric program
• Golf and Outdoor bike
6 Months Post-op

- **Cutting drills**
- **Advance sport specific drills:**
  - Soccer: Hard kicks if surgery leg is kick leg, do not plant on surgery leg
  - Basketball: lay ups and jump shots, no scrimmaging or one on one
  - Softball/Baseball: Throwing, hitting, running bases
  - Racquet sports: low level hitting against backboard
- **Increase running program**
  - Speed
  - Rounded turns
  - Backpedal
  - Low level direction changes
- **Aggressive agility drills:**
  - Jump
  - Hop
  - Plyometric activities
- **Teach deceleration and injury prevention techniques:**
  - Rounded turn
  - Bent knee landings
  - 3-step stops
- **Criteria for return to sport:**
  - Isometric quad/hamstring testing on surgery leg $\geq 95\%$ of non-surgery leg
  - Functional hop testing (broad jump, single leg hop, single leg triple hop with control, single leg triple hop with crossover) on surgery leg $\geq 95\%$ of non-surgery leg

Patient progression during the time frames along with general modality and exercise choice is left up to the discretion of the treating therapist. If you have any questions regarding this protocol, please contact (316) 440-1100.