

# Dr. Justin Strickland

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## **High Tibial Osteotomy**

## Weeks 1-2 (2-3 Visits/week)

• **Brace:** x 8 weeks

• **Ambulation:** NWB (No weight with leg flexed)

• **PROM**: 0°-90°

Patella Mobilization

Ankle pumps (PF with band)

Gastroc, Soleus, Ham Stretches

• Strengthening:

SLR (all planes)

Quad sets

Knee Ext (AA)

## Weeks 3-4 (2-3 Visits/week)

• Continue Brace

• **PROM**: 0°-120°

• Ambulation: NWB

• Strengthening:

SLR (all planes)

Quad Sets  $(0^{\circ},60^{\circ})$ 

Knee Ext (AAROM, 90°-30°

### Week 5-6 (1-2 Visits/week)

• Continue Brace

• **Ambulation:** NWB-TTWB (25%)

• PROM/AAROM/AROM: 0°-135°

• Strengthening:

SLR (all planes, ankle weight not to exceed 10% of body weight)

Quad Sets (90, 60°, 30°)

Knee Ext (active 90°-30°)

CKC: TG mini squats w/in WB limits

Stationary Bike

#### Weeks 7-8 (1-2 Visits/week)

#### • Ambulation:

Week 7: WB 50%-75%

Week 8: Full WB

Week 8: DC BRACE

• **ROM:** Active 0°-135°

### • Strengthening:

Ham Curls (active 0°-90°)

Total Gym/ Leg Press (70°-10°)

- Closed chain (Sagittal Plane): Wall sits, Mini squats, etc.
- Aerobic Conditioning: Stationary bike

## **Weeks 9-12 (1-2 Visits/week)**

- Closed Chain (Frontal and Transverse Planes): Step-Ups (2-4" block), etc.
- Continue to progress quad strengthening
- Balance/Proprioception: SLS ex
- Aerobic Conditioning:

Water walking

Swimming (straight leg kicking)

Walking

Stair machine (low resistance and stroke)

Ski machine (short stride and level, low resistance)

## <u>3-6 Months (weeks 13-26, 1-2 Visits/week)</u>

• Straight ahead jogging:

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

- Begin low level, double leg jumps
- Teach deceleration techniques with landings (step n sticks)

## 6 Months (weeks 27-52, 1-2 Visits/week)

- **Swimming** (full kicking),
- **Cutting:** Lateral, carioca, figure 8'. Need to teach cutting and deceleration techniques. NO cutting until 6 months unless otherwise approved by MD.
- Functional training:

Plyometric training: box hops, level, double leg.

Sport specific drills

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) 978-9000.