



Cartilage Repair Center

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Distal Femoral Osteotomy

Stage 2 (7+ weeks)

PRIMARY GOALS

INCREASE TIBIAL-FEMORAL AND PATELLA-FEMORAL MOBILITY
RESTORE QUADRICEPS CONTROL AND ROM

BRACE	♦Knee immobilizer/brace with ambulation until good quad control/ SLR (~3-6 weeks)
PRECAUTIONS	♦FWB with one crutch or cane and progress as pain allows
ROM	♦Continue full AROM and gentle PROM exercises, progressing as tolerated ♦FROM by 12 weeks post-op
THEREX	♦Stationary bicycle with gradual increased in resistance based on level of comfort ♦Continue quad sets, SLR in brace, leg curl and heel slides ♦Strengthen quadriceps, hamstrings, and hip abductors/extensors using ankle weights and/or elastic band resistance through full ROM as tolerated ♦Gentle closed-chain terminal knee extension 0-40 degrees (TKE) permitted starting at 9-10 weeks as tolerated per weight-bearing restriction
THERAPY	♦Continue gentle multi-directional patella mobilization as needed ♦Whirlpool or pool therapy as available to enhance ROM and quadriceps/hamstring muscle control ♦E-stim for VMO/quadriceps muscle re-education/biofeedback as needed ♦Gentle massage/deep friction to hamstring insertions, suprapatellar quadriceps, medial/lateral gutters, and infrapatellar fat pad region 2-3 weeks post-op
COMMENTS	♦Activity level should be modified if increased pain, catching, or swelling occurs ♦No progression of this protocol until cleared by MD at 12 weeks post-op

For Outpatient Physical Therapist:

2-3x week / 6 weeks



ORTHOPEDIC & SPINE INSTITUTE

at St. Mary's Medical Center