LAKESHORE & Joint Institute

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Tibial Tuberosity Osteotomy & AMZ Rehabilitation Protocol

Name	Date	
Procedure		
Procedure Date	<u> </u>	

***Range of motion is an important progression of therapy, but limiting swelling is important.

Respecting swelling will decrease pain and improve motion.***

	BRACE/ WEIGHT BEARING /ROM	THERAPEUTIC EXERCISES
	GOALS	AND
		INTERVENTIONS
Phase 1	Long Brace locked at 0 degrees for all activities	Quad sets, isometrics
(Week	(except hygiene and PT)	Ankle Strengthening
0-3)		Straight leg raises (4 way)
/	Non Weight Bearing (Occasional Toe touch with	Heel slides within restrictions
	brace locked)	Resisted SLR (4 way) standing
		Patellar Mobilization Stretching
	ROM	NMES (Home use ok)
	0-30 degrees week 1	Cryotherapy
	0-60 degrees week 2	
	(may be delayed by surgeon)	
Phase 2	Brace open 0-30 degrees Week 3, 0-60 degrees	Same as phase 1 plus:
(Weeks	Week 4, 0-90 degrees Week 5, unlocked/open	Gait training
3-6)	Week 6	
,		Closed chain toe raises
	25-50% Weight bearing with crutches	
	Wean off crutches after week 4.	Wall sits, mini-squats, inclined leg press
	FWB week 6	low loads within range restrictions and if
		ok by Surgeon (bone healing dependent)
	ROM	
	0-90 degrees week 3	Stationary Bike (if 105 deg.)
	0-120 week 4	
	Full Rom week 6	
Phase 3	No Brace	Same as phase 1 and 2 plus:
(Weeks		
7-12)	FWB	Open Kinetic Strengthening Hamstrings 0-90 deg., Quadriceps 90-30 deg.

	Full ROM	Step ups/downs (gradual)
		Leg Press 70-10 deg.
	Improved gait, balance and strength	Swimming, Stairclimber, elliptical (
		week 9)
Phase 4	80-100% strength	Same as Phase 3 plus:
(Week	Normal gait, running pattern	
12-24)	Normal Balance and proprioception	BOSU/disc step ups/balance
12 2 1)	Gradual return to activities/sports	Mini-trampoline activities
		Intermittent running program
		Floor agility ladder
		Plyometrics
		Functional Test

Comment	ts:	
FCE	Work Conditioning/Work Hardening	Teach HEP
	rery patient's therapy progression will vary Please use your best clinical judgment on a considered to improve patient's outcom	dvancing a patient. If other ideas are
Patien	t's recovery is a team approach: Patient, fa surgeon. Every team member plays an i	
Signature	•	Date