## Noyes Knee Institute Rehabilitation after High Tibial or Distal Femoral Osteotomy

Postoperative Weeks

Postop Months

		TOBIO	- Clative	***************************************		T ostop ivientilis		
	1-2	3-4	5-6	7-8	9-12	4	5	6
Brace								
Long-leg postoperative	X	X	X	X	(X)*			
Unloading						(X)*	(X)*	(X)*
Range of motion minimum goals								
0°-110°	X							
0°-130°		X						
0°-135°			X					
Weight bearing								
None to toe-touch	X	X						
25%-50% body weight			X					
Full (fracture site healed)				X	(X)*			
Patella mobilization	X	X	X	X				
Modalities								
Electrical muscle stimulation	X	X	X	X				
Pain/edema management (cryotherapy)	X	X	X	X	X	X	X	X
Stretching								
Hamstring, gastrocnemius-soleus, iliotibial	X	X	X	X	X	X	X	X
band, quadriceps								
Strengthening								
Quadriceps isometrics, straight leg raises,	X	X	X	X	X			
active knee extension								
Closed-chain: gait retraining, toe-raises,		(X)	X	X	X	X		
wall-sits, mini-squats								
Knee flexion hamstring curls (90°)				X	X	X	X	X
Knee extension quads (90°-30°)				X	X	X	X	X
Hip abduction-adduction, multi-hip			***	X	X	X	X	X
Leg press (70°-10°)			X	X	X	X	X	X
Balance/proprioceptive training				X	X	X	X	X
Weight-shifting, mini-trampoline, balance board, Biomechanical Ankle Platform				Λ	Λ	Λ	Λ	Λ
System, Biodex Balance System  Conditioning:			-	1	-			
Upper body cycle		X	X	X	1			
Bike (stationary)		A	X	X	X	X	X	X
Aquatic program			X	X	X	X	X	X
Swimming (kicking)			A	A	X	X	X	X
Walking					X	X	X	X
Stair-climbing machine			1		X	X	X	X
Ski machine			1		X	X	X	X
Recreational activities			1				- 11	X
recipational activities		1	1	l	1			/1

<sup>\*(</sup>X): Based on patient symptoms, function, resumption weight-bearing, fracture site healing.