



Cartilage Repair Center

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High Tibial Osteotomy (HTO)

Stage 2 (6-12 weeks)

PRIMARY GOALS

INCREASE TIBIAL-FEMORAL AND PATELLA-FEMORAL MOBILITY

RESTORE QUADRICEPS CONTROL

BRACE

- ♦ Knee immobilizer with ambulation until good quad control/independent SLR

GAIT

- ♦ Use bathroom scale to progress as follows:

Weeks 7 & 8

PWB 1/3 Body Weight

Weeks 9 & 10

PWB 2/3 Body Weight

Weeks 11 & 12

FWBAT with crutches

Week 13+

Crutch, Cane, or no device as tolerated

*Progress per guidelines above as pain allows.

ROM

- ♦ Continue full AROM and gentle PROM exercises
- ♦ CPM may be discontinued.

THEREX

- ♦ Low weight (max 10-20 lbs) open-chain leg extension and curl
- ♦ Stationary bicycle with gradual increased tension per 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 regions

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:

1-3x week / 6 weeks



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at St. Mary's Medical Center