

COMPREHENSIVE PHYSICAL THERAPY

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### Sports Medicine/Foot & Ankle

**Distal Femoral Osteotomy (DFO)/  
Proximal Tibial Osteotomy (HTO)**  
Post-Operative Protocol

#### Phase I - Maximum Protection

##### Weeks 0-6:

- Brace- wear at all times unlocked
- Toe touch weight bearing (TTWB) for 6 weeks

##### Goals

- Reduce inflammation and pain
- Protect surgical repair
- Range of motion: No restrictions

##### Exercise progression

- PROM, AAROM, and AROM
- Quad and glute isometric activation
- Patellofemoral mobilizations
- Open chain hip strengthening
- Able to perform bike with no resistance
- Local core stabilization exercises within weight bearing restrictions

#### Phase II- Progressive Stretching and Early Strengthening

##### Weeks 6 to 8:

- Brace- wear at all times unlocked
- Progress to weight bearing as tolerated (WBAT)
- Progress range of motion

##### Goals

- Reduce inflammation and pain
- Protect surgical repair
- Full range of motion by 8 weeks
- Gait training

##### Exercise progression

- PROM/AROM/AAROM to achieve full range of motion
- Initiate closed kinetic chain exercises to progress weight bearing status and facilitate muscle activation
- Core stabilization exercises

#### Phase II- Progressive Strengthening

##### Weeks 8 to 12:

- Discontinue brace
- Full weight bearing
- Progress closed chain strengthening from double limb to single limb
- Initiate balance/proprioceptive exercises

##### Goals

- Full range of motion
- Normal gait pattern
- No swelling
- Progress limb strength

##### Exercise progression

- Initiate elliptical trainer
- Progress closed kinetic chain strengthening from double limb to single limb
- Proprioception drills

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#### Phase IV- Advanced Strengthening and Endurance Training

##### **Weeks 12 to 16:**

- Advance strengthening program
- Prepare for Preliminary functional test to perform at 16 weeks
- Progress balance and proprioception

##### Goals

- Full range of motion
- Protect repair
- Normal gait pattern
- Increase single leg strength

##### Exercise progression

- Single limb closed chain exercises
- Proprioception drills

#### Phase V- Running Progression and Plyometric Progression

##### **Weeks 16 to 20:**

- Administer Preliminary functional test at 16 weeks for physician to review
- Initiate straight line jogging at 18 weeks if proper biomechanics are demonstrated
- Initiate plyometric training at 18 weeks progressing from double limb to single limb
- Advance strengthening program

##### Goals

- No swelling
- Full range of motion
- Symmetrical strength and power

##### Exercise progression

- Basic ladder series
- Linear jogging progression
- Plyometric progression

#### Phase V- Return to Sport

##### **Weeks 20 to 24:**

- Progress plyometric training to multi-direction, change of direction, and deceleration
- Administer Return To Sport functional test prior to 6 month follow up appointment with MD

##### Goals

- No swelling
- Full range of motion
- Symmetrical strength and power

##### Exercise progression

- Advance ladder, hurdle, and plyometrics
- Sport specific field/court drills
- Non-contact drills



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**Distal Femoral Osteotomy (DFO)/  
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 Post-Operative Protocol

Criteria to be released for return to sport

- Follow-up examination with the physician
- Pass Return To Sport functional test at >90% (involved vs. uninvolved limb)
- Display symmetry and confidence in high-speed cutting, multi-plane plyometric drills, sprinting and decelerating

Anticipated return to sport:

- 6-9 months for contact and non-contact athletes

Revised \*\*\*