

Rehabilitation Protocol: Opening Wedge High Tibial / Distal Femoral Osteotomy

Date of Surgery: _____

Osteotomy: ☐ High Tibial (HTO) ☐ Distal Femoral (DFO)

Concomitant: ☐ Osteochondral Allograft (OCA) ☐ ACL Reconstruction ☐ Meniscus Repair/Transplant – modifications listed in each phase; follow the more conservative restriction

No closed chain exercises until 6 weeks. Progression to full weightbearing pending radiographic healing. Please contact our office with any questions or concerns.

☐ **Phase I – Protection (Weeks 0–6)**

- **Weightbearing: Toe-touch weightbearing with crutches for 6 weeks**
- **Hinged Knee Brace: Weeks 1–2:** locked in full extension except PT. **Weeks 3–6:** unlocked; may remove for sleep
- **Range of Motion** – As tolerated (meniscus repair/transplant: follow those ROM limits)
- **OCA: Brace locked in extension at all times except PT for 6 weeks. CPM 0–30°, 2 hours 3× daily** out of brace
- **ACL Reconstruction:** Brace for ambulation only; unlock at week 4. ROM 0–45° days 1–4, 0–60° day 5, 0–75° weeks 1–3, 0–90° week 4; CPM 0–30°, 2 hours 3× daily. Gentle submaximal isometric knee extension; light leg press and vertical squats (no weight) from week 4
- **Therapeutic Exercises**
 - Heel slides 0–90°; quad sets with NMES (quad stim); ankle pumps
 - Non-weightbearing calf/hamstring stretches
 - SLR with brace locked in extension; resisted plantarflexion

☐ **Phase II – Weightbearing Progression (Weeks 6–8)**

- **Weightbearing: Wean over 2 weeks: two crutches, then one, then none** (ACL: partial weightbearing weeks 6–8, discontinue crutches at 8 weeks)
- **Brace:** Unlocked for ambulation or discontinued; off for sleep. OCA: discontinue CPM once flexion $\geq 90^\circ$
- **Therapeutic Exercises**
 - SLR without brace if full extension maintained
 - Stationary bike with low resistance

☐ **Phase III – Strengthening (Week 8 – Month 3)**

- **Weightbearing:** Full; discontinue crutches with normal gait; discontinue brace per our office
- **Therapeutic Exercises**
 - Mini squats 0–45°, progressing to step-ups and leg press 0–60°
 - Closed chain TKEs; toe raises; balance; hamstring curls
 - Moderate resistance on bike; ACL: light knee extension 0–60°, pool program
- **Criteria to Progress:** Full pain-free ROM (≥ 0 –115°); no effusion; good quad control; radiographic healing

☐ **Phase IV – Return to Activity (Months 3–9)**

- **Therapeutic Exercises**
 - Progress closed chain strengthening with increased resistance; lunges, lateral step-ups
 - Treadmill walking, swimming, then sport-specific activities

- **Return to Activity:** Full pain-free ROM; strength $\geq 80\%$ of contralateral limb; satisfactory exam; physician clearance (ACL: follow ACL return-to-sport criteria)