

Rehabilitation Protocol: Unicompartmental Knee Arthroplasty (UKA)

Date of Surgery: _____

Compartment: ☐ Medial ☐ Lateral

Weightbearing as tolerated with assistive device unless otherwise specified. Monitor edema; limit activities that increase pain or swelling. Please contact our office with any questions or concerns.

☐ **Phase I (Weeks 1–5)**

- **Weightbearing:** WBAT with assistive device until gait is non-antalgic
- **Precautions:** Delay reciprocal stairs until strength and control restored; no submersion of incision until cleared
- **Range of Motion** – PROM/AAROM flexion and extension; prioritize full terminal extension
- **Therapeutic Exercises**
 - Quad sets/heel props, standing TKEs, prone active extension; SLR all planes once full extension
 - Quad, gluteal, hamstring, calf strengthening; NMES/biofeedback; consider BFR
 - Forward and lateral step-ups/step-downs from 2–4"; transfer training
 - Balance: bilateral to unilateral; gait training with/without cane
 - Bike: short crank >90°, standard >110°; patellar and scar mobilization once incision stable; cryotherapy, compression
- **Criteria to Progress:** Flexion >110°, extension 0°; SLR without lag; normal gait on level surfaces; controlled 4–8" step-up; symmetric sit to stand

☐ **Phase II (Weeks 6–11)**

- **Therapeutic Exercises**
 - Quad strengthening: closed chain (squats, step-downs, leg press) and open chain (banded or machine knee extension); bilateral to eccentric to single leg
 - Proximal/core strengthening; stair training; floor transfers
 - Balance progression (static to dynamic, stable to unstable)
 - Incline/uneven surface gait; low-impact cardio (treadmill, elliptical, bike)
- **Criteria for Discharge:** Flexion >120° supine, extension 0°; reciprocal stairs; quad LSI >80%; pain-free 6–8" step-down; floor transfers; independent HEP

☐ **Phase III – Return to Recreation (Weeks 12–52, if applicable)**

- **Therapeutic Exercises**
 - Activity-specific training; endurance (elliptical, power walking); low-impact agility; dynamic balance
- **Return to Activity:** Low-impact sports (walking, swimming, cycling, golf, skiing) with physician clearance; no increase in pain or edema