

HIGH TIBIAL OSTEOTOMY POSTOPERATIVE REHABILITATION PROTOCOL

Phase I: 0-6 Weeks: TTWB, ROM 0-90°

- **Weightbearing:**
 - Toe-Touch Weightbearing, with brace locked in extension
 - **Hinged Knee Brace:** Locked in extension for all activities (including sleeping) – but, should be removed for PT
 - **Range of Motion:** AROM/AAROM/PROM – Goal of 0-90
 - **Therapeutic Exercises:** Heel slides 0-90 degrees, quad sets, ankle pumps, non-weightbearing calf/hamstring stretches, straight leg raise with brace locked in full extension, resisted ankle dorsiflexion/plantarflexion
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Phase II: 6-12 Weeks: WBAT, ROM as Tolerated

- **Weightbearing:**
 - As tolerated – may discontinue use of crutches – Goal is normal gait pattern
 - **Hinged Knee Brace:** Discontinue if capable of straight leg raise without extensor lag
 - **Range of Motion:** AROM/AAROM/PROM – Goal: Full pain-free ROM
 - **Therapeutic Exercises:** Mini-squats 0-45 degrees, progress to step-ups, leg press 0-60 degrees, closed chain terminal knee extensions, toe raises, balance activities, hamstring curls, may increase to moderate resistance on the stationary bicycle
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Phase III: 3-9 Months: Gradual Return to Activities

- **Weightbearing:**
 - Full weightbearing with a normal gait pattern
- **Range of Motion:** Full pain-free ROM
- **Therapeutic Exercises:** Progress closed chain activities, begin treadmill walking, swimming, and sport specific activities
 - Advance bike, add elliptical at 12 wks as tolerated Swimming okay at 12 wks
 - Progress to functional training, including impact activity after **24 wks** when cleared by MD