

PROTOCOL TITLE

Name of Protocol/Regime	Consultant	Updated On	Updated By	Review Date
НТО	DAWSON	Jan 2016	P.J.HAMPTON	

Please note that surgeons may have different post op instructions which must be adhered to **Inpatients**

On-Discharge

- Photocopy op. notes to attach to referral.
- Plan for D/C , refer to outpatients and complete D/C summary.
- Refer to OT for ADL's as required.
- Ensure that the Patient has the initial exercise sheet as required.

Outpatients – Operation notes must be attached

Post-op 0-4 weeks

GOALS- Control pain

Control swelling

SLR without lag

Aim for 90 degrees knee flexion and 0 degrees extension with ortho glide and

mobile patella

THERAPY GUIDELINES

Immediate WB as tolerated with EC,s



<u>4 – 6 weeks</u>

GOALS Reduce pain meds as appropriate Increase control SLR Progress ROM knee flex/ext to accommodate static bike Control swelling Advance to normal gait pattern without EC,s

THERAPY GUIDELINES

Driving maybe commenced when functional ROM and FWB Early proprioceptive training Hydrotherapy Low resistance bike

6-12 weeks

GOALS

FROM

Full strength

THERAPY GUIDELINES

Increased resistance on static bike.

Rower

Treadmill walking

Stepper

core control (Basic Swiss ball)

12weeks-6/Months



<u>GOALS</u>

Normal strength

Jogging

Increase in eccentric control

THERAPYGUIDELINES

Single leg dips

Open chain resisted exs

Back to work

<u>6 months +</u>

<u>GOALS</u>

Return to functional activities

Progress to sports specific activities (If appropriate)

THERAPY GUIDELINES

No restrictions

Running

Shuttle runs

Cutting

