

## High Tibial Osteotomy

Name of Protocol/Regime	Consultant	Updated On	Updated By	Review Date
HTO	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



#### 4 – 6 weeks

##### 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



## **GOALS**

Normal strength

Jogging

Increase in eccentric control

## **THERAPY GUIDELINES**

Single leg dips

Open chain resisted exs

Back to work

## **6 months +**

## **GOALS**

Return to functional activities

Progress to sports specific activities (If appropriate)

## **THERAPY GUIDELINES**

No restrictions

Running

Shuttle runs

Cutting

