Unicompartmental Knee Replacement Protocol

Patient Name: ___________________________________________ Date: __________________________

Diagnosis: ___________________________________________ Date of Surgery: ________________

PHASE 1: INITIAL PHASE

Post-Op Day 1 through the first 3 weeks

- Ankle pumps
- Heels slides
- Quad sets – may be done with Russian for quadriceps activation
- Glut sets
- 4-way straight leg raise
- Large arc quads
- Clamshells
- Calf stretch
- Hamstring stretch
- Calf raises – focus on equal weight bearing
- Marching
- Hamstring curls
- Bike (for ROM – if tolerated)
- Mini squats
- Step ups
- Manual therapy – patella mobilization, PA/AP tibial mobilization (grade I/II)
- Modalities – ultrasound, interferential current

** Range of motion should be approximately 5°-110° by the end of this phase

PHASE 2: INTERMEDIATE PHASE

Weeks 4-6

Continue with previous or modified versions of previous exercises, but may add:

- AROM 0°-120°
- Add weight to straight leg raises up to #2
- TKE with theraband
- Step-ups
- Step-downs
- Single leg stance
- Wall sits
- Manual therapy – tibial mobilizations (grade I-III), fibular AP/PA mobilizations

PHASE 3: ADVANCED PHASE
Weeks 7 – 3 months
Continue with previous or modified versions of previous exercises, but may add:
  • Increase weight with leg raises up to #5
  • Walking program – begin at ¼ mile and gradually increase
  • Upper body machines
  • For cardiovascular fitness – elliptical, walking outside or on a track, aquatic exercise, cycle.
  • NO treadmill walking due to compression on the new joint
  • Golf – may begin chipping or putting at 6 weeks, driving at 3 months, and then slowly progress into a full game

PHASE 4: FINAL PHASE

Month 3+
Continue with previous or modified versions of previous exercises, but may add:
  • Begin using leg weight machines
  • Recommend activities – elliptical, cycle, walking, aquatic exercise, low impact aerobics, yoga, tai chi, Theraball exercises
  • NOT recommended – running/jogging, high impact aerobics, jumping rope or plyometrics

Comments:

Signature: ________________________________ Date: __________________