Laith M. Jazrawi, MD Associate Professor of Orthopaedics Chief -Division of Sports Medicine Tel: (212) 598-6784



Balance activitiesHamstring curls

To annual Earlier d'annuel no ableur au lobber

Rehabilitation Protocol: Distal Femoral Osteotomy

Name:	Date:
Diagnosis:	Date of Surgery:
• Brace • Thera	t Bearing and Range of Motion Non-weight bearing with crutches ROM: As tolerated –CPM for 2 hours, 3x daily, from 0-30° of flexion out of brace
 Weigh Brace O Thera O 	(Weeks 6-8) t Bearing and Range of Motion As tolerated with crutches - begin to advance to a normalized gait pattern without crutches Use Unlocked for ambulation Remove for sleeping Discontinue CPM if knee flexion is at least 90° peutic Elements Continue above SLR without brace if able to maintain full extension Initiate stationary bike with low resistance
• Weigh o • Brace o • Thera o	(Weeks 8-3 months) t Bearing and Range of Motion Full weight bearing Discontinue crutches when normal gait Use Discontinue use - per physician peutic Elements Continue above Mini-squats 0-45° progressing to Step-ups and Leg Press 0-60° Closed chain terminal knee extensions Toe raises



Signature:

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Date: _____

Phase IV (3-9 months) • Weight Bearing and Range of Motion
o Full
o Pain-free
Brace Use
o None
 Therapeutic Elements
 Continue above with increased resistance
 Progress closed chain activities
 Begin treadmill walking, swimming, and sport-specific activities
Comments:
Frequency: times per week