

# Curtis Bush, MD 817-878-5300 High Tibial Osteotomy Protocol

# Phase 1: Immediate Post-Op (0-2 WEEKS) GOALS

- Non weight bearing 6-8 weeks, hinge knee brace (FROM)
- Decrease pain and swelling
- Full immediate ROM
- Maintain flexibility of hamstrings, calves
- Gluteal and quadriceps activation
- Patella mobility

# **EXERCISE SUGGESTIONS**

#### **ROM & Flexibility**

- Heel slides (+/– slider board) in supine and in seated position
- Seated active assisted knee flexion (towel slides with heel on floor)
- Seated calf stretch with towel knee bent (soleus), knee straight (gastrocnemius)
- Seated hamstring stretch (back straight)

# Muscle Strength & Endurance

#### Quadriceps:

• Quadriceps isometrics lying

#### Hip/Gluteals:

- Gluteal squeezes supine or standing
- Standing hip flexion/extension, abduction/adduction

#### Calves:

• Ankle pumping+/- with leg elevation

#### **Modalities**

- Ice / Cryo-cuff 15-25 minutes
- Interferential current therapy (pain relief)

# Phase II: Non-Weight Bearing Strengthening (2-6 WEEKS)

# **GOALS**

- NWB for 6-8 weeks post op
- FROM
- Non weight-bearing strengthening exercises: hip, hamstrings, quadriceps, calves

#### **EXERCISE SUGGESTIONS**

# ROM

• Continue as needed with slider board, up wall

# Extension

- Sitting passive leg extension with roll under heel
- Prone leg hangs off end of bed/plinth
- Continue with hamstring/calf stretches

#### Flexion

- Supine with legs up wall heels slides (knee flexion) with gravity assisted
- Supine legs up on swiss ball roll heels towards buttocks
- Prone assisted knee flexion (belt, opposite leg)
- Bike pendulums: high seat ½ circles forward/backward → full circles lower seat as tolerate

# Muscle Strength & Endurance

#### Quadriceps:

- Quadriceps isometrics in standing/sitting/lying +/- muscle stimulation or biofeedback
- Quads over roll
- Standing closed-chain terminal extension with tubing at knee forward facing (active terminal extension) and backward facing (passive terminal extension)

#### Hip/Gluteals/Hamstrings:

- Straight leg raise (on bed) with pelvic stability (all 4 planes)
- S/L clam shells
- Standing hip flexion/extension, abduction/adduction → progress to pulleys/bands (watch for excessive trunk shift/sway)
- Prone knee flexion
- Quadruped fire hydrant
- Supine bridging: 2 legs →1 leg
- Supine bridging on swiss ball: 2 legs →1 leg

#### Calves:

• Ankle plantar flexion with theraband

#### **Modalities**

• Ice/IFC/Game Ready

# Phase III: Progressive Weight-Bearing and Strengthening (6-12 WEEKS)

## **GOALS**

- Continue with surgeon instructed weight-bearing limit
- Crutches: partial weight bearing progress to full weight bearing
- Brace at surgeon discretion
- Monitor, normalize and retrain gait over given timeframe
- Full and pain free knee range of motion
- Initiate cardiovascular conditioning
- Baseline proprioceptive/balance re-education
- Weight-bearing strengthening of lower extremity muscle groups

#### **EXERCISE SUGGESTIONS**

#### **ROM**

- Patellar and/or tibial-femoral joint mobilizations if needed to achieve terminal ROM
- Continue with bike

#### Flexibility

- Assisted quadriceps stretch in side-lying, prone or in standing as tolerated
- Standing stretches (partial to full weight-bearing as tolerated) for gastrocnemius (knee straight) and soleus (knee bent), ensure back foot is straight

#### Weight Bearing & Gait

- Progress from 2 crutches → single crutch → full weight bearing, always maintaining normal walking pattern
- Weight shifting (the allowed weight) on affected leg by use of 2 weigh scales (side-to-side and forward/backward) → progress to equal weight bearing as tolerated
- Weigh scales: when 50%WB mini squat with equal weight bearing

#### Muscle Strength & Endurance

#### Quadriceps:

- Mini wall squat (30°) progress to 60°-90° (+/-wall)
- Shuttle: (one bungee cord) 2 leg squat (¼ ½ range) and 2 leg calf raises, may progress slowly and as tolerated from 2-1 leg squats/calf raises, increasing ROM and resistance
- Sit to stand 2 legs with high seat height progress by decreasing height of seat+/- with muscle stimulation
- Leg press machine: low weight 2 legs (½ ¾ range)
- Bungee cord walking: forward/backward/side step with slow control on return as tolerated
- Static Lunge (¼ ½ range)  $\Rightarrow$  progress to dynamic lunge step (¼ ½ range) with proper alignment (shoulders over knees over toes) as tolerated
- Step ups and down 2-4": lateral, forward

# Hamstrings/Gluteals:

- Continue hip strengthening with increased weights/tubing resistance
- Tubing kickbacks (mule kicks)
- Supine on floor legs on swiss ball: bridging plus knee flexion (heels to buttocks)
- Chair walking/stool pulls
- Prone active hamstring curls progress with 1-2 lb weights
- Sitting hamstring curls with light tubing/pulley system for resistance

#### Calves:

- Standing 2 legged calf raises with/without support progress raises from 2-1 foot
- Toe walking as tolerated (when full weight bearing)

#### Proprioception

With balance drills on unstable surfaces, be aware of and correct poor balance responses such as hip hiking with INV/EVER and trunk extension with DF/PF.

*GOAL:* maintain stance on board regardless of ability to control board position Wobble boards with support (table, bars, poles) through full ROM: side-to-side, forward/backward

- Standing on ½ foam roller: balance → rocking forward/backward
- Single leg stance 30-60 seconds (when full WB) → progress to unstable surface, with and without vision

## Cardiovascular Fitness

- Bike with increasing time parameters
- Elliptical trainer

#### **Modalities**

Ice/IFC

# Phase IV: Return to Activity (3-6+ Months)

#### **GOALS**

- Continue and advance strengthening: lower chain concentric/eccentric strengthening of gluteals, quadriceps & hamstrings
- Dynamic lower chain strengthening
- Progress cardiovascular conditioning
- Progress proprioception
- Sport specific training

#### **EXERCISE SUGGESTIONS**

Muscle Strength & Endurance

#### Quadriceps:

- Sit to stand →lower bed height (watch mechanics) →single leg
- Progress resistance of Shuttle working on strength & endurance, 2 → 1 leg
- Lunging in Bungee →add speed and direction change as tolerated
- Static Lunge (full range) → dynamic lunge → lunge walking
- Forward and lateral step-ups 4-6-8" (watch for hip hiking or excessive ankle dorsiflexion)
- Eccentric lateral step down on 2-4-6" step with control (watch for hip hiking or excessive ankle dorsiflexion)

#### Hamstrings/Gluteals:

- Fitter: hip abduction and extension (poles for support) → progress side-to-side
- Shuttle standing kick backs (hip/knee extension)
- Tubing kickback (mule kicks) increased tension
- Stool pulls/Chair walking
- Standing hamstrings curls weights/pulleys/ Bungee
- Continue hip strengthening with increased weights/tubing resistance

#### Calves:

- Shuttle eccentric heel drops 2legs →1 leg
- Calf raises with heel drop off steps 2 legs →1 leg

#### Proprioception

- Continue on wobble boards and begin to add basic upper body skills (i.e. throwing, use of racquet in hand)
- Single leg stance on unstable surface i.e. pillow, mini-tramp, BOSU, Airex, Dynadisc with/without support progress to no vision
- Standing 747 eyes open/closed progress to mini trampoline
- Single leg stance performing higher end upper body skills specific to patient goal(s)

### Cardiovascular Fitness

- Bike: increasing time or resistance progress to outdoor cycling
- Treadmill walk +/− incline → quick walk → increased speed

- Swimming or pool running in shallow water
- Functional sport patterning with increased speed, reps etc...as needed/tolerated

HTO: Guidelines for Manual Therapy and	Phase II	Phase III	Phase IV
Exercise Phase I			
ROM & Flexibility:			
Ankle pumping +/- leg elevation		•	
Heel Slides (+/-slider board, up wall)	•		•
Seated active assisted knee flex	xion •		•
Seated calf & hamstring stretch			•
Passive extension with roll und		•	
Prone hangs (leg off bed)		•	
Stationary bike	•		•
Joint Mobilizations (patellar, tib	o-femoral)	•	
Quad stretches		•	
Standing weight-bearing calf st	retches: gastroc,	•	
soleus  Muscle Strength & Endurance			
Quadriceps:			
Isometric quads	•		•
Quad over roll		•	
Closed chain terminal extension	n •		•
with tubing: forward and			
backward facing			
Squats: wall, mini, 60°-90°	•		•
Shuttle: leg press & calf press -	2		•
legs, 1leg (progress with ↑resistance/rep	nc)		
Sit to stand: high seat, low seat			•
legs, single leg	., _		
Leg press machine: 2-1 leg	•		•
Bungee cord walking: forward,	•		•
backward, side step, lunging			
Static Lunge: ¼-½-full, dynamic	•		•
Step ups (concentric):2-4-6-8"	•		•
Step down (eccentric):2-4-6-8"	•		•
Hamstrings.Gluteals: Gluteal squeezes (supine or	•		•
standing)	•		•
Standing hip		•	•
flexion/extension,			
abduction/adduction			
Supine SLR x four directions		•	
S/L: clam shells		•	
Prone knee flexion		•	
Quadruped fire hydrant		•	•
Supine bridging: double,		•	•
single, ball, +knee flexion Hamstring curls: prone, sitting,	•		•
manistring curis. profile, sitting,	•		•

standing
Chair walking/stool pulls
Hip strengthening: weights,
pulleys, tubing
Tubing kickbacks (mule kicks)
Shuttle standing kick backs (hip/knee extension)
Pro-fitter (abduction, extension, side-to-side)

# References on site

http://fowlerkennedy.com/wp-content/uploads/2015/11/HIGH-TIBIAL-OSTEOTOMY-HTO-PROTOCOL-November-2015.pdf