

**Proximal Tibial Osteotomy Protocol
Dr. Hultman**

Time Frame	Treatment	Goals
Post-Op Day	<ul style="list-style-type: none"> -Removal of dressings, change if needed. -Cryotherapy and education in signs of infection -Patient NWB -HEP: quad sets, heel slides (0-110°), SLR x 4 	<ul style="list-style-type: none"> -Independent with conservative management, HEP, and cryotherapy -Pain management
Phase I 0-8 weeks	<ul style="list-style-type: none"> -Weight bearing: TTWB x 2 weeks, PWB 25% at 2 weeks, increase 25% every 2 weeks, cleared for FWB by MD at 8 weeks -ROM goals: 0-110° week 2, 0-135° week 4, Full ROM by week 6 -Biking allowed at 4 weeks as allowed by ROM -May progress with light weight bearing exercises with weight bearing restrictions 	<ul style="list-style-type: none"> -Protection of the knee -ROM goals as listed -Manage effusion -Avoid/limit atrophy -Ensure full active extension
Phase II 8-12 weeks	<ul style="list-style-type: none"> -Begin weight bearing with goal of normalizing gait (cleared by MD at 8 weeks) -Progress with balance and strengthening avoiding impact activity -Advance proprioceptive exercises when good strength and control is achieved -Avoid loading the knee past 90° 	<ul style="list-style-type: none"> -Normalize weight bearing and gait -Avoid favoring the limb -Full AROM and strength 5/5
Phase III 12+ weeks	<ul style="list-style-type: none"> -May begin impact activities at 12 weeks with MD permission -Normalize movement patterns and strength in all planes -Advance with core strength and sport specific exercises as tolerated with MD clearance -Normal movement patterns and no antalgia noted with functional exercises before clearing for return to activity 	<ul style="list-style-type: none"> -Normalize movement patterns in all directions -Build neuromuscular control and confidence in the limb for return to sport/work