

**Patellofemoral Articular Cartilage Surgery with Distal Realignment AMZ Osteotomy Protocol**

Name \_\_\_\_\_ Today's Date \_\_\_\_\_

Diagnosis \_\_\_\_\_ Surgery Date \_\_\_\_\_

Frequency: 1 2 3 4 5 times/week

Duration: 1 2 3 4 5 6 weeks

Side: R / L

Evaluate only  Provide home exercise program (HEP)

Evaluate and Treat

*Therapeutic Exercise*

**PHASE 1:** Weeks 0 - 6

- Heel-down weight-bearing (~20 pounds)
- Brace locked in extension (except for CPM - 0 to 45 degrees)
- 2-6 weeks: may let knee hang off bed/table 0-90 degrees up to 3X per day for few minutes
- CPM 6 to 8 hours per day (0 to 45 degrees)

\*Quad sets, co-contractions, isometric abduction/adduction, ankle strength

**PHASE 2:** Weeks 6 - 12

- Transition to full weight-bearing from weeks 6 to 8
- Wean from brace from weeks 6 to 8
- Progress to full range-of-motion
- Discontinue CPM

\*6-10 weeks: Straight-leg raise, 45 degree wall-sits, terminal knee extension 0-30 degrees with theraband  
\*10-12 weeks: Hamstring strength, 0-45 degrees with theraband

**PHASE 3:** Weeks 12 - 6 months

- Full weight-bearing, full motion with normal gait
- No brace, no crutches, no CPM

\*Treadmill walking slow pace, progress to balance/proprioception

**PHASE 4:** Months 6 - 12

- Full weight-bearing, full motion with normal gait
- No brace, no crutches, no CPM

\*Advance closed-chain strengthening exercises, focus on single leg strength, initiate light plyometrics

**PHASE 5:** Months 12 - 18

- Gradual return to competitive sport
- Maintenance strengthening, flexibility

\*Continue strength training, progressive running and agility, high impact sports at 18 months

Comments:

Modalities: \_\_\_ Per therapist \_\_\_ Electrical Stimulation \_\_\_ Ultrasound \_\_\_ Heat before/after \_\_\_ Ice before/after

\_\_\_ Aquatherapy \_\_\_ Massage \_\_\_ Trigger points \_\_\_ ART (Active release techniques) Other \_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_

\*Weight-bearing for first 6 weeks to protect osteotomy healing

\*\*Post-operative stiffness in flexion is not uncommon and patients are encouraged to achieve 90 degrees of flexion at least 3 times per day out of the brace after sutures removed

\*\*\*If significant pain or swelling occurs along this protocol, it must be modified to decrease symptoms