

Physical Therapy Prescription – Distal Femoral Osteotomy

Name: _____ Date of Surgery: _____

Procedure: R / L Distal femoral osteotomy

Frequency: 2-3 times per week for 6 weeks

PHASE I (Weeks 0 – 2): Period of protection, decrease edema, activate quadriceps

- **Weightbearing:** Heel-touch in brace locked in extension
- **Hinged Knee Brace:** Locked in full extension for ambulation and sleeping (remove for PT)
- **Range of Motion:** AROM/AAROM/PROM with therapist; goal of 90°
- **Therapeutic Exercises:** calf pumps, quad sets, heel slides 0-90°, SLR in brace locked in full extension
- **Modalities:** Per therapist, including electrical stimulation, ultrasound, heat (before), ice (after)

Phase II (Weeks 2 – 6)

- **Weightbearing:** Heel-touch in brace
- **Hinged Knee Brace:** Unlocked 0-90°, off at night; discontinue completely at week 6 if good quad control
- **Range of Motion:** Progress to full, painless AROM
- **Therapeutic Exercises:** Advance Phase I, progress non-weight bearing flexibility, begin floor-based core/glute exercises; straight-leg raises with brace in full extension until quad strength prevents extension lag
- **Modalities:** Per therapist, including electrical stimulation, ultrasound, heat (before), ice (after)

Phase III (Weeks 6 – 8)

- **Weightbearing:** Advance 25% weekly until full WB with normalized gait pattern
- **Range of Motion:** Full
- **Therapeutic Exercises:** Advance Phase II, begin closed chain exercises (wall sits, shuttle, mini-squats, toe-raises), begin stationary bike
- **Modalities:** Per therapist, including electrical stimulation, ultrasound, heat (before), ice (after)

Phase IV (Weeks 8 – 16)

- Advance Phase III exercises; focus on core/glutes; progress flexibility and strengthening
- Add elliptical at 12 weeks
- Swimming allowed at 12 weeks

Phase V (Weeks 16 – 24): Gradual return to athletic activity

- Advance Phase IV exercises
- Return to sport-specific activity and impact when cleared by MD at 5 months postop

Signature: _____

Date: _____