

Sabrina Strickland, MD
Hospital for Special Surgery
523 East 72nd Street
2nd Floor
New York NY 10021-4099

# **DISTAL FEMORAL OSTEOTOMY GUIDELINES**

	WEIGHT- BEARING STATUS	BRACE	RANGE OF MOTION	THERAPEUTIC INSTRUCTIONS	PATIENT'S POST OPERATIVE CHECKLIST
Week 0-6	Crutches  NWB with foot rest on the ground for balance when standing.	YES  Locked in full extension while walking.  Take off or unlock the brace while resting.	Full  Keep up with range of motion 0-90 degrees by week 2-3.  Focus on regaining full extension.  Place Towel under ankle.	Emphasize patient compliance to home exercise program and weight bearing precautions/progression  Avoid pain with therapeutic exercise & functional activities  Quad muscle reeducation  Exercises: Quad sets, heel slides, ankle pumps, gravity assisted knee flexion	<ul> <li>Bandages should be left on through 1st post op appointment. If bloody or suspect infection call the office immediately.</li> <li>Take Aspirin or Xarelto daily x 30 days</li> <li>Bruising and swelling is normal, it may travel to the ankle. Elevate the leg when laying, perform ankle pumps.</li> <li>Apply ice/Gameready 4-6 times/day, 20min on/60min off.</li> <li>Remove brace while sleeping after 1-2 weeks.</li> </ul>
	***1x session at H 212-606-1005 to s	<ul> <li>Start Physical therapy, 1-2 weeks after surgery and should continue through 6 months.</li> </ul>			

Week 6-8	WBAT  Use crutches until discontinued by your physical therapist.	VES Unlock brace when good quad control achieved.	Full	Normalize gait  Continue improving ROM, stationary bike.  Patellar mobilization  Stationary bike  No open chain knee extension.	<ul> <li>Patients are responsible for understanding the individual insurance coverage for PT.</li> </ul>
Week 8-12	Full WB	As needed	Full	PT/HEP: LE strength progression within parameters from PT/physician.  Continue/normalize phase I exercises as needed  Continue improving ROM, stationary bike with resistance as appropriate.	
Week 13-22+				Emphasize patient compliance to maintenance strength program  Avoid pain with therapeutic exercise & functional activities.  24+ Weeks - Avoid running/high impact exercise until adequate strength development and as advised by your PT and/or physician.	

### Post Op Brace/CyMedica Evive

• You will be prescribed a long brace for immediately after surgery along with crutches. You will wear the brace for 4-6 weeks. This will help protect your knee until your quad muscle gets stronger. We recommend the CyMedica Evive brace with integrated muscle stimulator. This will help reeducate your quad muscle after surgery and improve your function early. The CyMedica Evive brace requires an upfront deposit which is refundable after processed through your insurance. Medicare does not provide coverage.

## **Game Ready Ice Machine**

• We recommend rental of this cold and compression unit offered by a hospital equipment vendor (Eschen). It is an efficient and effective means of controlling swelling and pain post operatively and helps avoid dependency on pain medication. You should be contacted by the vendor for rental information including cost.

# Hardware Removal (Screws/plates)

• You don't have to have the screws removed, however, if you would like to, the procedure is done after the osteotomy is well-healed, typically around the 8-9 month mark. This is a simple same-day procedure done in the OR. The surgeon makes a small incision using the same healed incision from the first surgery. You should avoid running/high impact activity for a few weeks afterwards but have no ROM restriction and crutches are to be used as needed.

### **Driving Restriction**

- Left leg surgery: 1 week for automatic cars, 3-6 weeks for manual transmission cars
- Right leg surgery: 6-8 weeks