

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

TIBIAL TUBERCLE OSTEOTOMY WITH DISTALIZATION AND MPFL RECONSTRUCTION AND CARTILAGE IMPLANTATION 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. Remove while sleeping after 1-2 weeks. 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. CPM goals start 0-40 degrees POD#3 -Week 2: 0-60 Week 3: 0-90 Week 4: 0-110 Week 5: 0-120 6hrs/day x 6 weeks	Emphasize patient compliance to home exercise program and weight bearing precautions/progression Avoid pain with therapeutic exercise & functional activities Prevent quadriceps inhibition Exercises: Quad sets, heel slides, ankle pumps, gravity assisted knee flexion	<ul style="list-style-type: none"> ○ Bandages should be left on through 1st post op appointment. If bloody or suspect infection call the office immediately. ○ Take Aspirin or Xarelto daily x 30 days ○ Bruising and swelling is normal, it may travel to the ankle. Elevate the leg when laying, perform ankle pumps. ○ Apply ice/Gameready 4-6 times/day, 20min on/60min off. ○ Patients are responsible for understanding the individual insurance coverage for PT.

	<p align="center"><u>Physical therapy*</u></p> <p>Physical therapy will begin with a 1 week evaluation which can be done virtually or in person. To set up your initial evaluation please contact 212-606-1005.</p>				
Week 6-8	Transition to FULL Weight Use crutches until discontinued by your physical therapist.	YES	Full	Normalize gait Continue improving ROM, stationary bike. Patellar mobilization No open chain knee extension.	
Week 8-12	Full weight	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 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. It is recommended to use 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.