

## Rehabilitation Protocol: Distal Femoral Osteotomy (DFO)

	<b>Weight Bearing</b>	<b>Brace Use</b>	<b>Range of Motion</b>	<b>Therapeutic Elements</b>
<b>PHASE I</b> <b>0 - 2 weeks</b>	Touch-down weight bearing (TDWB) with crutches.	Locked in extension at all times including sleep. Remove for exercises and possible CPM.	Advance as tolerated. Goal: at least 90° by 4wks, 120° by 6wks.	Quad sets, hamstring isometrics, co-contractions, ankle pumps. Regain full extension. Modalities: heat before, ice after. Quad stim. Start BFR.
<b>2- 6 weeks</b>		Unlocked.	PROM: 90° flexion at each therapy session.	
<b>PHASE II</b> <b>6 - 8 weeks</b>	50% WB x 1 week, then advance to FWB as tolerated, then wean crutches.	Discontinue brace if patient has controlled SLR without extension lag.	Progress to full ROM.	Start SLR out of brace. Progressive closed chain exercise. Bicycle without resistance. Continue BFR.
<b>8 - 12 weeks</b>	Full weight (FWB) with normal gait.	None.	Full A/PROM.	Advance closed chain exercise. Leg press 0-60°, Short arc wall squats. Balance exercises.
<b>PHASE III</b> <b>12 - 16 weeks</b>	FWB.	None.	Full A/PROM.	Begin open chain strengthening. Swimming and Treadmill walking for exercise. Progress to Elliptical (EFX).
<b>PHASE IV</b> <b>4 - 6 months</b>	FWB.	None.	Full.	Start progressive running program. Sports specific drills.  Continue strength training.  Consider return to high impact sports.