

MEDICINE Dr. Joshua D. Harris Houston Methodist Hospital Center for Orthopaedics & Sports Medicine

Office: 713-441-8393 Fax: 713-790-5134 www.joshuaharrismd.com

HTO (Opening-wedge High Tibial Osteotomy) Protocol

NameTo	oday's Date
Diagnosis Su	urgery Date
Frequency: 1 2 3 4 5 times/week	weeks Side: R / L
☐ Evaluate only ☐ Provide home exercise program (HEP)	
☐ Evaluate and Treat	
 PHASE 1: Period of protection; Weeks 0 - 6 Non-weight bearing with brace locked in extension with crutches 	Therapeutic Exercise Patellar mobs, SLR with brace locked in
 Active and passive NWB range-of-motion 0-90°; Obtain full extension Brace 0-90° while sleeping 	extension until no extensor lag, heel slides, quad/hamstring sets, NWB heel cord stretch, ankle pumps, prone hangs
PHASE 2: Weeks 6 - 8	
 50% partial weight-bearing with crutches Active and passive NWB range-of-motion 0-135° No weight-bearing with any knee flexion No brace while sleening 	Continue phase 1, SLR without brace if no extensor lag, stationary bike without resistance
No brace while sleeping	
 PHASE 3: Weeks 8 - 12 Weight-bearing as tolerated without crutches d/c brace per physician Ensure full motion 	Short-arc (0-45°) closed-chain exercises, mini-squats, 0-60° low resistance leg press, toe raises, hamstring curls, progress proprioception, continue core
 PHASE 4: Weeks 12 and beyond Gradual return to sport training and competitive sport Maintenance strengthening, flexibility May begin jogging and progress to running 	Sport-specific training, maintenance strengthening for core, hip abduction, hip extension, quads, hamstring, gastroc, flexibility, plyometrics, proprioception
Comments:	
Modalities: Per therapist Electrical Stimulation Ultrasound Heat	
Aquatherapy Massage Trigger points ART (Active release technique)	ues) Utner
Signature	Date