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Hip, Knee, Shoulder & Sports Medicine Surgery

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**PATELLA FRACTURE ORIF POST-OPERATIVE REHABILITATION PROTOCOL**

Phase	Restrictions	Therapeutic Exercises
Phase 1: Weeks 0-2 Goals: Reduce swelling and edema, minimize pain, retard muscle atrophy, protect the surgical repair, and avoid patellar tendon stress	-Patient may weight-bear as tolerated ONLY with the brace locked in extension -Patient should have full active knee extension by post-op day 14	-Passive range of motion 0-60 degrees -Edema Control -Pain management -Isometric quadriceps strengthening -Gentle hamstring, adductor, abductor strengthening with knee locked in extension -Ankle TheraBand exercises -Core strengthening -Modalities PRN
Phase 2: Weeks 2-6 Goals: Progress range of motion, minimize pain, retard muscle atrophy, protect the repair, and begin neuromuscular control	-Patient may weight-bear as tolerated ONLY with the brace locked in extension -Brace may be removed at night	-Passive range of motion 0-60 degrees. Increase range of motion by 10 degrees per week with a limit of 90 degrees -Isometric quadriceps strengthening -Gentle hamstring, adductor, abductor strengthening with knee locked in extension -Ankle TheraBand exercises -Initiate straight leg raises -Core strengthening -Modalities PRN
Phase 3: Weeks 6-10 Goals: Full range of motion, minimal pain, begin muscular activation and strengthening, protect the repair	-Patient may begin weight-bearing as tolerated with the brace unlocked on level ground -Brace locked for uneven surfaces (stair climbing, hills, etc.) -Progress to full range of motion -Strengthening dependent on physician clearance and fracture healing	-Progress to full passive, active, and active assisted range of motion without resistance. Increase motion by 10 degrees per week -Controlled straight leg raises -Progressive quadriceps strengthening as tolerated -Begin gentle hip, and glute strengthening

<p>Phase 4: Weeks 10-12</p> <p>Goals: Proper gait mechanics, improve lower extremity strength, neuromuscular control</p>	<p>-Discontinue brace use</p> <p>-Full range of motion</p>	<p>-Weight-bearing and ambulating without the brace</p> <p>-Gait training</p> <p>-Begin active knee extension with limited resistance and progress as tolerated</p> <p>-Stationary biking with limited resistance</p> <p>-Gentle double leg strengthening (mini squats, lunges)</p> <p>-Aquatic Therapy (kicking, gait training)</p> <p>-Stationary biking without resistance</p>
<p>Phase 5: Weeks 12 +</p> <p>Goals: Improve lower extremity strength, begin functional movement training, proprioception improvement, eccentric control</p>	<p>-Progress gently to avoid trauma to the repair</p> <p>-Initiate jogging</p> <p>-Progression to higher level activities and sports specific activities</p>	<p>-Initiate deceleration and single leg hopping</p> <p>-Initiate cutting at week 20</p> <p>-Initiate agility at week 20 (floor ladder, cone drills), and sports specific activity</p> <p>Criteria for Discharge:</p> <ul style="list-style-type: none"> - <10% strength deficit in quads and gluteals - Limb similarity index of 90% or greater on functional hop and Y balance tests - 45/50 on biomechanical functional assessment tests (if performed) - No pain or complains of instability with functional progression of sports specific skills