LAKESHORE
Bone & Joint Institute

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# ORIF Patella (Accelerated) Protocol

**Name** _____ **Date** _____

**Procedure** _____

**Procedure Date** _____

**Frequency** 1 2 3 4 5 times/week **Duration** 1 2 3 4 5 6 weeks

Therapist will change your dressing at your first appt. This is typically 2-3 days after surgery. Surgical wounds are typically closed with skin staples. There will be gauze and padding over the incisions and the extremity wrapped with an ACE wrap. The surgical dressing should be changed by the therapist using ***sterile*** technique. This includes sterile field, sterile gloves, betadine or chlorhexidine skin cleanser and sterile supplies when redressing the wounds. Do NOT remove steri-strips. The new dressing should include dry gauze and ACE wrap. Before the new dressing is applied the wounds should be clean and dry. Please do not use tegaderm unless it was used at the time of surgery or if specifically stated on the orders.

The dressing will be changed for the second time at your second therapy visit. After the second visit and second dressing change patient is permitted to shower at home. Remove the ACE wrap before shower. The wounds should be covered with Press-N-Seal. If the wounds get wet, use a hair dryer to *completely dry* the area prior to covering with ACE wrap after the shower.

Once you are permitted to get the incisions wet, warm soapy water should *gently* rinse the surgical area. Do NOT scrub the area. Pat the area dry with a clean towel and keep free of lotions or creams. Do NOT soak in a pool, bath or hot tub until permitted by the surgeon's office. Please wear clean clothes following shower and be conscious of any pet hair or other contaminants near the surgical area.

Any time the dressing is changed or examined, ***please wash hands*** prior with antibacterial soap. Do not apply any ointments or medications to the area.

*****Range of motion is an important progression of therapy, but limiting swelling is important. Respecting swelling will decrease pain and improve motion.*****

## Accelerated ORIF Patella

| | WEIGHT BEARING | BRACE | ROM | THERAPEUTIC EXERCISE |
|---|---|---|---|---|
| **PHASE 1** (weeks 0-2) | WBAT with crutches | Locked in full extension | 0-45° | Hamstring and calf stretching; quad, glute and hamstring sets; ankle pumps.<br><br>Swelling control. |
| **PHASE 2** (weeks 2-4) | WBAT with crutches | Locked in full extension | 0-60° | Heel slides, sit and dangle assist from uninvolved side for control, heel props, ankle therabands.<br><br>Monitor swelling. |
| **PHASE 3** (weeks 4-6) | WBAT with crutches | Locked in extension | By week 6- the goal is 0-90°. | Heel slides, sit and dangle, wall slides, continue quad sets, patellar mobilization. Gentle SLR with no resistance, prone hangs.<br><br>Quad stim for VMO. |
| **PHASE 4** (weeks 6-8) | Gradual return to full WB | Discontinue brace 6-8 weeks- per MD | Gradually progress ROM, maintain full extension. | Heel slides, AROM/PROM for flexion and extensions. Stationary bike, SLR 4-way. |
| **PHASE 5** (weeks 8-12) | Full WB | None | Full WB. | Strengthening for open and closed chain per patient tolerances.<br><br>Proprioceptive exercises. |

**Comments:**

FCE _____ Work Conditioning/Work Hardening_____ Teach HEP_____

**Every patient's therapy progression will vary to a degree depending on many factors. Please use your best clinical judgment on advancing a patient. If other ideas are considered to improve patient's outcome do not hesitate to call.**

**Patient's recovery is a team approach: Patient, family/friend support, therapist, and surgeon. Every team member plays an important role in recovery.**



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**Signature**_____ **Date** _____



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