LAKESHORE
Bone & Joint Institute

Anthony Levenda M.D.
Sports Medicine, Shoulder & Knee
Reconstruction
Direct Line (219) 395-2109

ORIF Patella (Conservative) 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.*****

Phase I (0-6 weeks):

Period of protection. A home-program alone may suffice for this period of time. This protocol is conservative. Would be used for a non-athlete or sedentary individual.

Formal PT may be helpful after 4 weeks once ROM is initiated in the brace.

• WBAT with crutches unless otherwise indicated by surgeon, brace locked in extension during all weight-bearing activity and during sleep.
• ROM: No active extension or forced passive flexion.
All ROM should be non-weightbearing and with the brace on, following the progression below:
0-4 weeks: Brace locked in full extension (0 degrees).
4-5 weeks: Brace unlocked from 0-30 degrees.
5-6 weeks: Brace unlocked from 0-60 degrees.
6-7 weeks: Brace unlocked from 0-90 degrees.
• Ankle/Hip: ROM exercises 2-3 x per day.
• Strict elevation above the heart while seated.
• No quadriceps strengthening until at least 6 weeks post-op.

Phase II (6-12 weeks):

Begin regular, supervised strengthening with therapist and wean from the brace.

• Wean from crutches, then D/C brace once ambulating with a normal gait and can perform SLR without an extension lag.
• ROM: After 7 weeks post-op, brace fully unlocked; advance active and active-assisted ROM as tolerated; gentle passive stretching at end-range.
Goal: 0-120 degrees or greater by 12 weeks.
• Strengthening: Begin isometric quad sets, SLRs
• Progress to closed chain strengthening (no open-chain) once out of the brace

Phase III (3-6 months):

Begin more advanced conditioning.

• Advance strengthening as tolerated, continue closed-chain exercises. Increase resistance on equipment.
• At 5 months, could begin jogging, plyometrics- if applicable. This is patient specific.
• Begin to wean patient from formal supervised therapy encouraging independence with home exercise program by 6 months.

Comments:

FCE _____ Work Conditioning/Work Hardening_____ Teach HEP_____

Lakeshore Bone & Joint Institute
www.lbji.com
(219) 921-1444

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.

Signature_____ **Date** _____

Lakeshore Bone & Joint Institute
www.lbji.com
(219) 921-1444