



DISTAL FEMORAL OSTEOTOMY PROCEDURE

Post-Operative Rehabilitation Protocol

0-6 weeks

- NWB for 6 weeks, using crutches
- Brace locked in extension
- Can remove the brace for hygiene (brace must be worn while sleeping for the first 2 weeks)
- ROM: 0–90° (Passive, Active Assist)
- Perform quad sets and ankle pumps
- 2 weeks: Begin floor-based core, hip, and glutes exercises, along with patellar mobilization and SLR. Progress non-weight bearing flexibility and modalities

6-8 weeks

- Begin WBAT progression, advancing to PWB (25%, then 50%) starting at 6 weeks
- Discontinue crutches once gait normalizes and becomes non-antalgic
- Discontinue brace when sufficient quad control is achieved
- Full Active/Passive ROM, progress as tolerated
- Advance closed chain quad strengthening and balance exercises
- Continue core, pelvic, and stability work
- Begin stationary bike at 6 weeks
- Progress SLR and floor-based exercises, focusing on hip/core

8-16 weeks

- Achieve full WBAT by 8 weeks
- Continue progressing flexibility and strengthening
- Increase functional balance, core, and glutes exercises
- Advance bike usage; add elliptical at 12 weeks as tolerated
- Swimming allowed at 12 weeks

>16 weeks

- Begin Phase IV activities

- Progress to functional training, including impact activities after 20 weeks (with MD clearance)

Note: Progression through these phases should be based on individual recovery, with all exercises adjusted as necessary under the guidance of your surgeon and physical therapist. Regular follow-ups with the surgical team are crucial to ensure optimal recovery