

REHABILITATION GUIDELINES FOR TIBIAL PLATEAU FRACTURE

PHASE I (WEEKS 1-6)

DATES:

Appointments	<ul style="list-style-type: none"> MD follow up visit at 2 weeks post op Begin physical therapy for knee ROM at 2 weeks post op
Rehabilitation Goals	<ul style="list-style-type: none"> Maintain knee EXT to allow incisions to heal and prevent knee flexion contracture Maintain NWB x 6 weeks (okay to place foot on ground for balance in standing) or as cleared by MD 90 degrees flexion by 6 weeks post op Pain and edema control
Precautions	<p>WB:</p> <ul style="list-style-type: none"> NWB (okay to place foot down for balance in standing) x 6 weeks TTWB at weeks 6-12 <p>Brace:</p> <ul style="list-style-type: none"> hinged brace unlocked 0-90 degrees x 6 weeks DC brace at 6 weeks but maintain TTWB for weeks 6-12
Suggested Therapeutic Exercises	<ul style="list-style-type: none"> Knee PROM and AAROM to 90 degrees flexion Quad strengthening to gain full knee extension; use of NMES if indicated Global LE stretching CKC hip strengthening on uninvolved side Multi-plane ankle strengthening NWB Core strengthening
Cardiovascular Exercises	<ul style="list-style-type: none"> Upper body ergometer
Progression Criteria	<ul style="list-style-type: none"> 90 degrees knee flexion Full knee extension

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PHASE II (WEEKS 6-12)

DATES:

Appointments	<ul style="list-style-type: none"> MD follow up at week 6 Continue physical therapy 2 x week
Rehabilitation Goals	<ul style="list-style-type: none"> Regain full knee ROM Normalize gait out of brace Strengthening of LE's and core Pain and edema control
Precautions	<ul style="list-style-type: none"> TTWB weeks 6-12 (unless otherwise indicated by MD)
Suggested Therapeutic Exercises	<ul style="list-style-type: none"> AROM knee flexion Aggressive gait training IF cleared by MD at week 8 as follows: <ul style="list-style-type: none"> - Week 8: TTWB - Week 9: 25% WB - Week 10: 50% WB - Week 11: 75% WB - Week 12: FWB Progressive LE strengthening including quads, hamstrings, hips <ul style="list-style-type: none"> - Total Gym - Bridges - Calf raises - SLS - Core strengthening - Pool exercises for strengthening
Cardiovascular Exercises	<ul style="list-style-type: none"> Pool walking Upper body ergometer Stationary bike Treadmill when FWB
Progression Criteria	<ul style="list-style-type: none"> Full ROM of knee

PHASE III (12 WEEKS – 6 MONTHS)

DATES:

Appointments	<ul style="list-style-type: none"> MD follow up at 6 months Continue physical therapy 1- 2 x week
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(Phase III continued) Rehabilitation Goals	<ul style="list-style-type: none"> Full ROM knee flexion and extension Strength 80% of uninvolved leg by week 16 Normalize gait without AD pain and edema control
Precautions	<ul style="list-style-type: none"> None unless otherwise indicated by MD
Suggested Therapeutic Exercises	<ul style="list-style-type: none"> Progress ankle, knee, hip strength Total Gym to leg press; double leg to single leg 4 way hip progression Bridges, ball curls, deadlifts, stool scoots Lunges, squats Core strengthening Progress balance exercises once WB Begin pool running at week 16, progress to land as able
Cardiovascular Exercises	<ul style="list-style-type: none"> Pool UBE Treadmill walking, progress to running in pool at week 16 then running on treadmill as able
Progression Criteria	<ul style="list-style-type: none"> Gait normalized without AD Strength 80% of uninvolved leg Progress to Phase IV at 6 months post op

PHASE IV (6 MONTHS – 12 MONTHS)

DATES:

Appointments	<ul style="list-style-type: none"> Follow up with MD at 6 months Continue physical therapy as needed 1-2 x/week for progression to independent gym/HEP
Rehabilitation Goals	<ul style="list-style-type: none"> Return to sport
Precautions	<ul style="list-style-type: none"> None unless otherwise indicated by MD
Suggested Therapeutic Exercises	<ul style="list-style-type: none"> Implement sport specific, multidirectional drills Begin bilateral plyometrics, progress to unilateral Continue with aggressive LE strength progression

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Cardiovascular Exercises	<ul style="list-style-type: none">• Treadmill running, bike, UBE
Progression Criteria	<ul style="list-style-type: none">• Independent with HEP• Passing score on return to sport test with low risk of re-injury reported• Return to sport

References:

Rubin, Amy, PT. Brigham and Women's Hospital Department of Rehabilitation Services. *Standard of Care: Tibial Plateau Fracture*. Retrieved from http://www.brighamandwomens.org/Patients_Visitors/pcs/rehabilitationservices/Physical-Therapy-Standards-of-Care-and-Protocols/Knee%20-%20Tibia%20plateau%20fracture.pdf.

Lind, Charles, MD. Rosenberg Cooley Metcalf Clinic at Park City. *Tibial Plateau Fracture Post-Operative Protocol*. Retrieved from <https://www.rcmclinic.com/patient-info/knee/rehab-instruction/dr-lind/144-tibial-plateau-fracture-post-op>

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