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Post-Operative Rehabilitation Guidelines for
Distal Femoral Osteotomy + MPFL

PHASE I (Weeks 0 – 6): Period of protection, decrease edema, activate quadriceps

- Weightbearing: Heel-touch weight-bearing with crutches
- Hinged Knee Brace: Locked in full extension for ambulation and sleeping (remove for PT)
- Range of Motion: initiate ROM 0-30°, gradually advance with PROM and AAROM
- Therapeutic Exercises: Gentle patellar mobs, quad/hamstring sets, heel slides, prone hangs, straight-leg raises with brace in full extension until quad strength prevents extension lag
- Modalities: Per therapist, including electrical stimulation, ultrasound, heat (before), ice (after)

Weeks 2-6:

- Weightbearing: Heel-touch weight-bearing with crutches
- Range of Motion: Unlock at 0-90° for all activities, remove when sleeping
- Therapeutic Exercises: Gentle patellar mobs, quad/hamstring sets, heel slides floor based core/glute exercises, straight-leg raises with brace in full extension until quad strength prevents extension lag
- Modalities: Per therapist, including electrical stimulation, ultrasound, heat (before), ice (after)

Phase II (Weeks 6 - 12)

- Weightbearing: Advance 25% weekly until full WB with normalized gait pattern
- Hinged Knee Brace: Wean between 6-8 weeks; discontinue completely once good quad control
- Range of Motion: Progress to full AROM, with goal of 90° by week 6, then advance as tolerated
- Therapeutic Exercises: ****No weight-bearing exercises with knee flexion angles >90°****
 - o Advance closed chain strengthening exercises and proprioception activities; begin wall sits and lunges; begin stationary bicycle (Weeks 6-8)
- Modalities: Per therapist, including electrical stimulation, ultrasound, heat (before), ice (after)

Phase III (Weeks 12 - 16)

- Weightbearing: Full
- Hinged Knee Brace: discontinue; consider using of patella stabilizing knee sleeve
- Range of Motion: Full, painless
- Therapeutic Exercises: Advance closed chain strengthening; advance proprioception training; begin elliptical at 12 weeks, Swimming allowed at 12 weeks

- Modalities: Per therapist, including electrical stimulation, ultrasound, heat (before), ice (after)

Phase IV (Weeks 16 – 24)

- Advance Phase III exercises; focus on core/glutes; progress flexibility and strengthening; maximize single leg dynamic and static balance and strength; initiate light plyometrics; improve treadmill walking/running progression

Phase V (>6 months): Gradual return to athletic activity

- Advance Phase IV exercises; focus on single leg dynamic and static balance
- Return to sport-specific activity and impact when cleared by MD at 6 months postop