

Knee Patellectomy Rehabilitation Protocol

Name: _____ Date: _____ DOS: _____

Rehabilitation Protocol KNEE PATELLECTOMY 3X/WK X 6 WKS

(0-4 Weeks)

GOALS / PRECAUTIONS

Weight Bearing:

- NWB with crutches or walker and use of Bledsoe brace or knee immobilizer

Frequency:

- PT 3x/week

ROM:

- PROM within limits of brace or upon MD advisement

CLINICAL INTERVENTION

Evaluation:

- ROM
- Gait
- Wound
- Edema

Home Exercise Program:

- Ice and moist heat instruction
- Scar massage
- E-Stim if indicated
- Self ROM as per MD Rx
- Consider Home ESU if appropriate

Ther Ex:

- Quad sets w/ E-Stim or biofeedback prn
- Calf stretch
- Ankle pumps
- Ham sets
- Calf strengthening w/ T-Band
- Isometric hip adduction

Modalities:

- E-Stim or biofeedback for Mm re-education if indicated
- E-Stim for edema control prn

Manual Therapy:

- PROM as per MD orders
- Scar massage prn



(4-8 Weeks)

GOALS / PRECAUTIONS

Weight Bearing:

- Progress to 20% WB-ing (or as per MD orders) with appropriate assistive device

Frequency:

- 2-3x/week

CLINICAL INTERVENTION

Ther Ex:

- **Initiate SLR's in all planes**
 - Initiate multi-angle knee isometrics
 - Heel slides, supine wall slides or sitting knee flexion for ROM
 - Continue ROM w/in limits of brace
 - Initiate aquatics if available and wound is healed

(8-12 Weeks)

GOALS / PRECAUTIONS

Weight Bearing:

- Progress to FWB-ing w/ crutches or walker

CLINICAL INTERVENTION

Ther Ex:

- Initiate gentle AROM / PRE's
- Initiate stationary bike
- Continue aquatics if available
- Progress AROM toward WNL

Signature: _____

Date: _____