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Post-Operative Rehabilitation: Tibial Tubercle Osteotomy

Phase 1 Physical Therapy (0-6 weeks)

- Brace locked in extension for ambulation and TTWB x 4 weeks, then unlocked x 2 weeks
 - Progress WB 25% every 3 days once brace is unlocked
 - No load in flexion
- Progress ROM
 - 0-30 degrees; progress 5-10 degrees every 3 days
 - Progress as tolerated after week 6
- NO open-chain exercises
- NO patellar mobilization
- Soft tissue mobilization, isometric exercises, core strengthening
- Tactile and verbal cueing to enable non-compensatory gait patterning
- HEP: leg bridge for extension, heel slides for flexion (up to 90 degrees), ankle pumps
- Isometric exercises for core, glutes, quadriceps, hamstrings

Phase 2 Physical Therapy (6-12 weeks)

- Continue ROM progression
- Initiate closed-chain strengthening and planks advancing as tolerated
- Proprioceptive training
- Standing weight shifts, backward/lateral walking without resistance (NO pivoting)
- Soft tissue mobilization, patellar mobilization, isometric exercises, core strengthening
- Initiate step-up and step-down programs (week 8)

Phase 3 Physical Therapy (12-24 weeks)

- Focus on functional exercises in all planes, advance only when fully controlled
- Advance closed-chain and core strengthening
- Proprioceptive training
- May begin straight treadmill jogging once able to perform single leg squat appropriately (typically at 4 months post op; will be cleared per physician)

Phase 4 Physical Therapy (24+ weeks)

- Advance closed-chain and core strengthening as needed
- Continue proprioceptive training
- Progress sport-specific drills and plyometrics (per physician)



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