

**TOTAL KNEE REPLACEMENT PROTOCOL
OUTPATIENT PHYSICAL THERAPY
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POST -OP DAY 1 - DAY 14

INITIATE OUTPATIENT PHYSICAL THERAPY FOLLOWING D/C FROM HOSPITAL
WOUND CARE

Clean incision site, instruct patient to clean daily
Apply sterile gauze pad and hold in place with TED Hose (do not use tape directly on the skin)

GAIT TRAINING/ASSISTIVE DEVICE

Weight bearing per physician orders
Walker/crutches

TED HOSE

Operative leg x 4 weeks /non-operative leg x 2 weeks

IMMOBILIZER

Patient may be sent home from the hospital with the immobilizer on due to quad weakness.
Outpatient Physical Therapist to determine when patient has adequate quad control to ambulate without the immobilizer.

#1 GOAL IS FULL ACTIVE EXTENSION

THER-EX

Review HEP

Quad set
SLR
Ankle pump
Heel slide
SAQ
LAQ
Hip abd/add
Heel prop

Manual stretching
Stationary bike
Standing heel raise
Lateral step ups

MODALITIES

Cryotherapy
E-stim (PRN)
Biofeedback (PRN)

POST-OP DAY 15 - 28

THER-EX

Continue above exercises
Standing exercises
TKE's
4 way hip
Marching - SL balance
Hamstring curl

Continue manual stretching as needed for full flexion and extension
Proprioception exercises

GAIT TRAINING / ASSISTIVE DEVICE

Transition to cane as tolerating

POST-OP DAY 29-36

THER-EX

Continue above exercises, progress as tolerating
Independent with HEP at D/C

GAIT TRAINING / ASSISTIVE DEVICE

Progress to no assistive device as appropriate

Physician Signature