



DR. MICHAEL BARROW HIGH TIBIAL OSTEOTOMY – REHABILITATION PROTOCOL

OW =Opening Wedge CW = Closing Wedge	POST OP WEEK				POST OP MONTH		
	1 to 2	3 to 4	5 to 6	7 to 12	4 to 5	6 to 9	9 to 12
Brace (Hinged P.O. ROM brace)	0° to 40°	FROM	FROM	FROM			
Weight-bearing (normal gait pattern ASAP)							
CW	PWB	PWB	FWB	FWB	FWB	FWB	FWB
OW	TWB	TWB	TWB / PWB	PWB	FWB	FWB	FWB
ROM Goal	0° to 60°	0° to 90°	0° to Full	0° to Full	0° to Full	0° to Full	0° to Full
ROM Exercises (within set ROM)							
Active (assisted) knee flexion / extension (foot sliding)	√	√	√	As reqd.			
Oedema management (RICE)	√	√	√	As reqd.	As reqd.	As reqd.	As reqd.
Note: Dr. Barrow would have performed an open wedge (OW) osteotomy.							

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Stretching							
Hamstring, calf, ITB	✓	✓	✓	✓	✓	✓	✓
Patella mobilisations	✓	✓	✓	✓	As reqd.	As reqd.	As reqd.
Strengthening Isometric quads	✓	✓	✓	✓	✓	✓	✓
SLR	CW	CW / OW	✓	✓	✓	✓	✓
Closed chain (protected weight bearing as required)				✓	✓	✓	✓
Gait re-ed, theraband, mini squats			✓	✓	✓	✓	✓
Open chain knee extension					✓	✓	✓
Hamstring curls					✓	✓	✓
Leg press				✓	✓	✓	✓
Hip extension, ABD, ADD (avoid varus / valgus stresses on knee)	✓	✓	✓	✓	✓	✓	✓
Cardiovascular stationary bicycle / swim, straight kick				✓	✓	✓	✓
Step machine				✓	✓	✓	✓
Running – straight					✓	✓	✓
Proprioception (e.g. weight transfers, balance board, mini tramp)				✓	✓	✓	✓
Dynamic stability (e.g. stepping on / off different surfaces and in all directions)					✓	✓	✓
Sport specific / agility drills (e.g. shuttle runs, cariocas, figure 8's)						✓*	✓

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Plyometrics (e.g. bounding, hopping, jumping)						√*	√
Activities							
Work – sedentary		√	√	√	√	√	√
Work – heave					√**	√	√
Driving				10w	√	√	√
Full sports	Consult with Dr Barrow						

*Progressed within limits of pain, swelling and muscle control.

**Dependent on type of employment.