TOTAL KNEE ARTHROPLASTY & REVISION TKA

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ACUTE CARE STAY	OUT-PATIENT THERAPY			NOTES:
	1-3 weeks post-operative	4-6 weeks post-operative	7-12 weeks post-operative	Important:
Ankle Pumps Quadricep Sets Straight Leg Raises Heel Slides Short Arc Quads Long Arc Quads Extension Prop AROM, AAROM and PROM as tolerated, Goal 0-120° Bed Mobility and Transfers Gait training: WBAT (unless otherwise noted by MD) with assistive device. Stairs	Continue acute exercises. Increase repetitions, add resistance, focus on quality and technique. NMES – Biphasic Current 250-400 usec, 35-80 pps Initially: 5 sec on/25 sec off for 5 min Progress to: 10 sec on/20 sec off for 10 minutes AROM, AAROM and PROM as tolerated, Goal 0-120° Flexibility: Hamstrings, Calf Isotonic Hip Strengthening:	Continue isotonic quadriceps & hip strengthening Continue flexibility: add quadriceps, hip flexor, gluteals, piriformis, as needed Continue ROM as tolerated, Goal 0-135° Stationary Bike Mini Squats Sportcord Knee Extension Total Gym (double leg; stress symmetry)	Continue ROM as tolerated, Goal 0-120° Progress quad and hip strengthening Total gym (single leg) Progress double leg balance/proprioception advance to single leg Chair squats (add depth based on functional demands) Wall sits Lunges	This protocol should be interpreted as a continuum . If a patient is progressing ahead of the time schedules, advance them as tolerated. Progress to individual functional tasks dependent on lifestyle as tolerated.
Any Questions? Please contact: Northwoods Therapy Associates Altoona, WI Chippewa Falls, (715) 839-9266 (715) 723-5066	WI	Double leg balance/proprioception Step Ups (4" - 6" step) Gait activation - March - Sidestep - Backwards Gait training: Progress. D/C assistive device when gait is non-antalgic.	Lateral Step Ups Step Downs Address functional activity demands.	NOTE: **Revision if ordered as is per MD. Follow MD weight bearing, ROM, activity specifics.
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