## Distal Patellar Realignment (Tibial Tubercle Transfer) Protocol

## Dr. Jose PadillaPatient:Chippewa Valley Orthopedics & Sports MedicineDOS:

Chippewa Valley Orthopedics & Sports Medicine
1200 OakLeaf Way, Suite A
Altoona, WI 54720

Sports Medicine
757 Lakeland Drive, Suite B
Chippewa Falls, WI 54729

	Week 1	Week 2	Week 3	Week 4	Week 5	We	eek 6	Week 7	Week 8	Months 3-6
Weight Bearing	WBAT	WBAT				100	0%	100%	D/C crutches	Swimming can start at week 9.
Brace Settings By MD initials	0/0	0/0	0/0	0/0	0/0	sett wee	Increase brace flexion settings weekly per MD, slightly less than the ROM in heelslide.		D/C Brace	Continue with strengthening programs working towards 80-90% of opposite side.
PROM Goal	0-60	0-70	0-90	Increase	as tolerated	l to fu	ıll range	of motion	Full	To progress to a running program, should be cleared by MD and have functional strength of
AROM Goal heelslide	0-50	0-60	0-70	Increase	as tolerated	l to fu	ıll range	of motion	Full	
PT visits/week	0	2-3	2-3	2-3	2-3	2-3	2-3		2-3	70%. Functional Testing appropriate
Shower	No	No With brace No Brace Sleep no brace								for jump program, agility, plyometrics
Exercises	Quad Sets	ts Continue with these, increasing reps and adding							aginty, pryometrics	
Follow	SLR's wit	h brace	No brace resistance as tolerated, SAQ's also appropriate							school.
MD	Patellar Mobs-emphasis on tilts									
instruction,	Multi-hip isotonics									
based on	Ham curls AA to active to resisted								Patient should have	
x-ray.			BAPS							no pain or swelling with progression of
		Stationary Bike								functional tasks.
Follow all	Closed Kinetic Chain Exercises-TKE with overball, tubing									
ROM and			Heel Raises							
WB restrictions			Total Gym, Partial Squats							Return to high level
with			Treadmill Walking							tasks with 80-90% strength of
exercises.			Dynamic Balance							quadriceps.
July 2013		Step-ups Resisted Ambulation, Balance and Proprioception					ion, Balance and			