

Total Knee Arthroplasty Protocol

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- A. Phase I (≈0-3 weeks post-op)
 - 1. Gait: WBAT using FWW or 2 crutches
 - 2. Brace: Some physicians use knee immobilizer, worn at night to maintain knee extension for ≈ 2 weeks.
 - 3. Cryotherapy – frequent
 - 4. Exercise
 - a. Frequent low-load, long-duration (LLLD) work for both flexion and extension
 - b. Early patellar mobilization
 - c. Regain quad control
 - d. Low level balance/proprioceptive work
 - e. Begin scar massage/soft tissue mobilization at ≈ 2 weeks

- B. Phase II (≈3-6 weeks post-op)
 - 1. Gait: Wean to use of a single point cane as indicated (i.e. no extension lag with SLR, no pain with WB, no antalgia)
 - 2. Continue cryotherapy as needed
 - 3. Exercise
 - a. Progressive OKC, CKC, Balance/Proprioceptive and gait stabilizing exercise
 - b. Continue frequent LLLD ROM work
 - c. Progressive non-impact cardio

- C. Phase III (6 weeks post-op)
 - 1. Gait: Wean from AD as indicated
 - 2. Exercise (transition to HEP only)
 - a. Long-term progressive OKC, CKC strength program
 - b. Long-term, progressive balance/proprioceptive work
 - c. Long-term non-impact cardio work