

# DFO (Distal Femoral Osteotomy) REHAB PROTOCOL

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Patient: \_\_\_\_\_  
 D.O.S. \_\_\_\_\_

	WEEK 0 Begins DOS	WEEK 1-3	WEEK 4	WEEK 5-7	WEEK 8-10	WEEK 11-12	MONTH 4-6	
<b>Weight Bearing</b> ****	NWB	TTWB	10%	To be determined by x-ray				
<b>Brace Settings</b>	0/0	0/0	0/90	Unlocked, no flexion limit				
<b>PROM GOALS</b>	0-30	0-70	0-90	Increase as tolerated				
<b>AROM GOALS</b>	0-30	0-40	0-60	Increase as tolerated				
<b>PT visits/week</b>	NONE	1-2	1-2	2-3	2-3	2-3	2-3	
<b>SHOWER</b>	NO	W/O Brace		Sleep w/o brace				
<b>EXERCISES</b> *follow all weight-bearing & ROM precautions*	<b>QUAD SETS</b>							
	SLR's with brace (typically able at 2 wks with assist)			→ without brace				
	Heel slides.....add supine wall slides			Active prone hamstring curls		Resisted hamstring exercise		
	Ankle pumps	Patellar mobilizations						
	<b>NOTE:</b>	4-way SLR with brace		Hip isotonics/multi-hip with brace until 8 weeks (resistance point above knee)				
		CKC quad ex (overball, sportscord, etc. as per WB guidelines)						
		Stationary Bike if 100° flexion ( per WB guidelines)						
		BAPS partial WB			→ full WB			
		Seated swiss ball per ROM and WB guidelines for PROM and proprioception						
		TOTAL GYM-PARTIAL SQUATS (per WB guidelines)						
		HEEL RAISES and SOLEUS						
		BALANCE AND PROPRIOCEPTION (per ROM and WB guidelines)						
		Treadmill single leg → both legs						
		STEP UPS						
		*PT visits/wk may vary.						
	*Individual exercise progression may vary.							
	*Return to work/recreational activities by MD only.							
	* Protocol may change based on bone and graft fixation integrity.							
	*FOLLOW SPECIFIC MD'S INSTRUCTIONS.							
	****WEIGHT BEARING MAY BE PROGRESSED AS PER MD BASED ON INDIVIDUAL AND X-RAY****							

**ANY QUESTIONS? PLEASE CONTACT:** NORTHWOODS THERAPY ASSOCIATES

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