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Physical Therapy Prescription – ORIF Tibial Plateau

Name:	Date:
Diagnosis: R / L Knee ORIF tibial plateau	Date of Surgery:
Frequency: 2-3 times per week for weeks	
Phase 1 (Day 1-4 weeks):	
	on, pillow under calf with leg elevated, patellar mobilizations,
gradually increase ROM 0-90 degrees, bra	
= :	ghts), ROM for flexion 0-45 degrees in sitting position with
	id contraction of hamstrings and calf. Resistance ankle plantar
	on with rubber tubing. Mini squats (0-45 degrees). No hamstring
PREs; Calf ROM	
Weight bearing: 0%	nrn. FMC nrn. gryatharany Chartes nana
Modalities: EMG biofeedback quadriceps Phase 2 (4 weeks-6 weeks):	s prn; Eivis prn; cryotherapy sports: none.
ROM: progress flexion as tolerated-10 de	groos/wook
Strength: PRE and SLR as above	grees/ week
Weight bearing: 0%	
Modalities: as above.	
Sports: none.	
Phase 3 (6 weeks-4 months):	
	mits; may remove brace for sleep at 8 weeks Strength: PRE-quad
	es, squats, hip abduction and adduction, stationary bicycling,
	swimming, sliding board; progress with closed kinetic chain
Strength: with weight bearing progress.	6,
Weight bearing: start at 25%, progress up	o to 100% by post-op week 10.
Modalities: as above.	,, ,
Sports: steps-ups, rowing machine, swim	ming, and slide board.
Phase 4 (4 months-6 months):	
ROM: as above	
Strength: PRE-quad PRE into full extensio	n with gradual transition
Weight bearing: Initiate straight ahead jo	gging to 1/2 speed running as tolerated (once 65% strength
attained in hamstrings and quadriceps)	
Modalities: prn	
Sports: initiate straight jogging to 1/2 spe	ed running(if applicable)
Phase 5 (6 months and beyond):	
ROM: as above	
Strengthening: as above	
Modalities: as above	
	aduated running program such as "functional rehabilitation
Sports(if applicable): progress through gr	
Sports(if applicable): progress through gr	has obtained near full ROM and has obtained at least 80% of quad