



## **Total Knee Arthroplasty**

### **Precautions:**

If an uncemented prosthesis is used, the patient may be partial weight bearing for up to 6 weeks.

### **Phase I (1 – 5 days post-op)**

- Wound care: Observe for signs of infection.
- Modalities: prn for pain and inflammation (ice, IFC)
- Edema: Cryotherapy, elevation and/or compression stockings.
- Gait
  - Ambulation with walker with weight bearing restrictions per MD.
  - Mobility training in hospital
- ROM
  - AROM/AAROM/PROM knee and hip.
  - PROM goal for knee 0 – 90 degrees hopefully prior to D/C from hospital.
- Strengthening: Isometric quadriceps and hamstring exercises

### **Phase II (5 days – 4 weeks post-op)**

- Wound care: Continue to monitor for signs of infection and begin scar management techniques when incision is closed
- Modalities: continue prn
- Edema: Cryotherapy, elevation and/or compression stockings.
- Gait: Ambulation with assistive device with weight bearing restrictions per MD.
- ROM
  - Continue as Phase I
  - Goal for 4 weeks 0 – 100 degrees (flexion as able but emphasis on full extension). Notify physician if Flex less than 90 degrees at 4 weeks
- Strengthening
  - Continue as Phase I.
  - Begin low resistance open and closed chain strengthening within weight bearing restrictions.

### **Phase III (4 – 10 weeks post-op)**

- Wound: Observe for signs of infection. Continue scar mobilizations.
- Modalities: Continue prn
- Edema: Cryotherapy, elevation and/or compression stockings.
- Gait: Increase to FWB at 6 weeks if there were MD restrictions.
- ROM: Maximize ROM to a goal for 6 weeks of 0 – 115 degrees max



- Strengthening
  - Increase resistance of closed chain strengthening.
  - Progress activities to improve function including up/down stairs, normalize gait pattern and ADL's.
  - Possible RTW with physician restrictions.
  - Progress HEP or exercise routine at fitness center.

**Phase IV (12+ weeks post-op)**

Progress strength to allow ambulation of community distances, all home ADL's, and increased work activities if needed.

Adapted from:

- 1) Brotzman SB, Wilk KE. Clinical Orthopedic Rehabilitation Second Edition. Philadelphia: Mosby; 2003
- 2) Wilk KE, Reinold MM, Andrews, JR. Rehabilitation Following Total Knee Arthroscopy. Winchester, MA: Advanced Continuing Education Institute, 2004.