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Physical Therapy **Tibial Plateau Fracture – Non-op Protocol**

Phase I – Maximum Protection (Weeks 0-6):

O to 1 week:

- Ice and modalities to reduce pain and inflammation
- Use crutches non-weight bearing for 6 weeks
- Brace locked in full extension for 6 weeks
- Initiate patella mobility manual techniques
- Begin full passive/AA knee range of motion exercises
- Quadriceps setting focusing on VMO restoration
- Multi-plane open kinetic chain straight leg raising
- Gait training with crutches (NWB)

Weeks 1 to 6:

- Initiate global lower extremity stretching program
- Begin stationary bike and pool exercise program (when incisions healed)
- Implement reintegration exercises emphasizing core stability
- Multi-plane ankle strengthening
- Deep water pool program

Phase II – Strengthening and Proprioceptive Phase (Weeks 6 to 12):

Weeks 6 to 8:

- Begin partial weight bearing at 25% of body weight and increase by 25% approximately every 3 days. May progress to one crutch at 7 1/2 weeks as tolerated, gradually wean off of crutches by week 8 – 9

Weeks 9 to 12:

- Normalize gait pattern
- Advance stationary bike program; begin treadmill walking and elliptical trainer; Avoid running and impact activity
- Initiate closed kinetic chain exercises progressing bilateral to unilateral
- Gym strengthening; leg press, hamstring curls, mini-squats and calf raises
- Step-up progression
- Proprioception training

Phase III – Advanced Strengthening and Initiation of Plyometric Drills (Weeks 12 to 16):

Weeks 16 to 20:

- Advanced closed chain and gym strengthening
- Begin linear impact progression – pool progressing to dry land
- Begin shallow water pool running program progressing to land as tolerated

Phase IV – Return to Sport Functional Program (Weeks 16 to 24):

- Advance linear running progression to multidirectional agility drills
- Plyometric progression
- Sports test for return to play
- Follow-up with physician