Patella Fracture Open Reduction Internal Fixation (ORIF) Physical Therapy Protocol

David P. Trofa, M.D.

Assistant Professor of Orthopaedic Surgery, Columbia University Medical Center Chief of Sports Medicine, New York-Presbyterian Westchester Director of Clinical Outcomes, Department of Orthopaedic Surgery Head Team Physician, Columbia University

www.DavidTrofaMD.com

Patient Name:	Date of Surgery:
Procedure: Right / Left Patella Fracture ORIF	
Frequency: 2x per week forweeks	
Phase I (0-6 weeks): Period of protection	
• Weightbearing: As tolerated with crutches, local	ked in extension.
Brace: Locked in extension during all weight be	
• ROM:	
 No active extension or forced passive fle 	xion.
o All ROM should be non-weightbearing (
the following progression:	,
■ 0-3wks: Brace locked at 0°	
 3-4wks: Brace unlocked from 0-3 	30°
■ 4-5wks: Brace unlocked from 0-6	50°
 5-6wks: Brace unlocked from 0-9 	90°
• Therapeutic exercises:	
o Hip/ankle ROM exercises 2-3x/day	
• Restrictions: No quadriceps strengthening	
Phase II (6-12 weeks): Initiate regular, supervised	strengthening and wean from the brace
• Weightbearing: As tolerated. Wean from crutch	nes.
Brace: Fully unlocked. May discontinue once an	mbulating with a normal gait and can
perform SLR without an extension lag. s	
• ROM: Advanced as tolerated. Goal 0-130° by w	veeks 12.
• Therapeutic exercises:	
 Initiate isometric quad sets 	

o Progress to closed chain strengthening (no open chain) once out of the brace

o SLRs

Phase III (3-6 months): Advanced strengthening.
 Rehabilitation Goals: Return to activities.

- Weightbearing: Full.
- **ROM:** Full.
- Therapeutic exercises:
 - o As above plus:
 - o Advance strengthening as tolerated with closed chain exercises
 - o 5 months:
 - Jogging and progress to agility training
 - Sports specific rehab as tolerated
 - o 6 months:
 - Wean patient from formal therapy and encourage independent home program