

Arthroscopic Tibial Spine Avulsion Repair Physical Therapy Protocol

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Patient Name: _____

Date of Surgery: _____

Procedure: Right / Left Arthroscopic Tibial Spine Avulsion Repair

Associated Procedure (checked if performed):

- Partial Meniscectomy
- Meniscus Repair

Frequency: 2x per week for _____ weeks

CPM

- Initiate POD1 with 0-40° and increase 5-10° per day as tolerated.
- Discontinue when 90-120° ROM obtained.
- Perform 3x per day in 2-hour sessions.

Phase I (0-6 weeks): *Period of protection*

- **Goals:**
 - Protect fracture fixation with the use of brace and specific exercises
 - Minimize effects of immobilization, inflammation, and edema
 - Obtain full ROM by end of the phase
- **Weightbearing and Brace Use:**
 - Weeks 0-4: Non-weight bearing (NWB). Locked in extension for ambulation and sleeping. Brace may be removed for PT and CPM.
 - Week 4-6: Toe touch weight bearing (TTWB). Locked in extension for ambulation. May unlock during sleep if able to perform 10 SLR without lag.
- **ROM:**
 - AAROM → AROM as tolerated
 - CPM as above
- **Therapeutic exercises:**
 - Patellar mobilization 5-10 minutes daily
 - Quad sets, heel slides
 - Straight leg raises with knee brace locked in extension until quadriceps strength prevents extension lag.

- Leg lifts in standing with brace on for balance and hip strength
- No restrictions to ankle/hip strengthening.
- **Restrictions:** No elliptical, no running, no jumping.

Phase II (6-12 weeks):

- **Goals:**
 - Maintain full ROM
 - Increase hip, quadriceps, hamstring and calf strength
 - Increase proprioception
- **Weightbearing:** Transition to WBAT.
- **Brace:** Unlock the brace in 30° increments (every 3-4 days) after week 6. Fully unlocked with weight bearing by the start of week 8. Discontinue during week 8.
- **Therapeutic exercises:**
 - As above plus:
 - Continue with ROM/flexibility exercises as appropriate
 - Closed chain extension exercises
 - Initiate stationary bike with no resistance for ROM and cardio (alter seat height as ROM increases).
- **Restrictions:** No elliptical, no running, no jumping.

Phase III (12-18 Weeks):

- **Therapeutic exercises:**
 - As above plus:
 - Begin elliptical
 - Begin straight ahead treadmill jogging Week 15.
 - Progress hip, quad, hamstring and calf strengthening
 - Mini-wall squats (0-60 degrees)
 - Lateral lunges and step ups
 - Hip abduction/adduction
 - Short-Arc Leg Press
 - Advance proprioceptive activities and agility drills.
- **Restrictions:** No jumping

Phase IV (5-6mo): *Sport-specific conditioning.*

- **Therapeutic Exercises:**
 - Advance strengthening as tolerated
 - Sports specific balance and proprioceptive drills
 - Initiate plyometric program as appropriate for patient's athletic goals
 - Agility progression including:
 - Side steps + crossovers, Figure 8's and Shuttle Running
 - One and Two Leg Jumping
 - Cutting/Accelerating/Decelerating/Agility ladder drills
- **Progression Criteria to Functional Sports Assessment:** Dynamic neuromuscular control with multi-plane activities without instability, pain or swelling; ability to land from a sagittal, frontal and transverse plan; leap and jump with good control and balance.