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Rehabilitation Protocol

Total and Partial Knee Arthroplasty

Phase 1 (1–5 days post-op)

Incision care: Observe for signs of infection

Modalities: PRN for pain and inflammation (ice, IFC)

Edema: Cryotherapy, elevation, compression wrap with ACE™ bandages toes to thigh

Gait: Ambulation with walker FWB unless otherwise noted by physician

ROM: AROM/AAROM/PROM of ankle, knee and hip

- PROM goal 0–90 degrees prior to discharge from hospital
- Really focus on extension over flexion

Exercises: Quad/hamstring sets, SAQ, heel slides, SLR

Phase 2 (5 days–4 weeks post-op)

Incision care: Continue to monitor for signs of infection and begin scar management techniques when incision is closed

Modalities: Continue PRN

Edema: Cryotherapy, elevation, compression wrap with ACE™ bandages toes to thigh

ROM: By 4 weeks, 0–100 degrees; emphasis on full extension

- Must attempt to get to zero degrees at all costs

Exercises: Continue as Phase 1

- Begin low-resistance open and closed chain strengthening

Phase 3 (4–10 weeks post-op)

Incision care: Continue to monitor for signs of infection and/or scar mobilizations

Modalities: Continue PRN

Edema: Cryotherapy, elevation, compression wrap with ACE™ bandages toes to thigh

ROM: Maximize ROM

- By 6 weeks, 0–120 degrees

Exercises: Continue as Phase 2

- Increase resistance of closed chain strengthening
- Progress activities to improve function including stairs, normalizing gait and ADLs
- Progress HEP or exercises routine at fitness center

Phase 4 (10+ weeks post-op)

Progress strength to allow ambulation of community distances, all home ADLs, and increased work activities if needed