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Guidelines For Tibial Plateau
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Rehabilitation Guidelines For Tibial Plateau

REHABILITATION GUIDELINES FOR TIBIAL PLATEAU FRACTURE PHASE I (WEEKS 1-6) DATES: Appointments • MD follow

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up visit at 2 weeks post op • Begin physical therapy for knee ROM at 2 weeks post op Rehabilitation Goals • Maintain knee EXT to allow incisions to heal and prevent knee flexion contracture

REHABILITATION GUIDELINES FOR TIBIAL PLATEAU FRACTURE

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- Begin physical therapy for knee ROM at 2 weeks post op
- Rehabilitation Goals
 - Maintain knee EXT to allow incisions heal and prevent flexion contracture
 - Maintain NWB x 6 weeks (okay to place foot on ground for balance in standing) or as cleared by Dr. Cien
 - 90 degrees flexion by 6 weeks post op

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REHABILITATION GUIDELINES FOR TIBIAL PLATEAU FRACTURE

REHABILITATION GUIDELINES: TIBIAL PLATEAU FRACTURE OPEN REDUCTION INTERNAL FIXATION STAGE 1 (Day 1 - 4 weeks): ROM: ASK SURGEON: hinged brace locked in full extension, pillow under calf with leg elevated, patellar

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mobilizations, gradually increase ROM 0-90 degrees, brace during sleep for 6 weeks.

**REHABILITATION GUIDELINES:
TIBIAL PLATEAU FRACTURE OPEN ...**
REHABILITATION GUIDELINES FOR TIBIAL
PLATEAU FRACTURE OPEN REDUCTION
INTERNAL FIXATION. Stage 1(Day 1-4

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weeks): ROM: hinged splint locked in full extension, pillow under calf with leg elevated, patellar mobilizations, gradually increase ROM 0-90 degrees, brace during sleep for 6 weeks.

Strength: quad sets and SLR (without weights), ROM for flexion 0-45 degrees in sitting position with eccentric and concentric quadriceps, avoid contraction

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of hamstrings and calf.

REHABILITATION GUIDELINES FOR TIBIAL PLATEAU FRACTURE OPEN ...

No resisted leg extension machines (isotonic or isokinetic) at any point. *Use the bone stimulator once per day (preferably at same time each day) for 30 minutes for 3 months. *Use the CPM

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set at 0 to 50 degrees for 6 hours a day for 4 weeks. Week 1

Tibial Plateau Fracture Surgery Rehab Protocol & Recovery

Initially, sports injury treatment using the P.R.I.C.E. principle – Protection, Rest, Icing, Compression, Elevation can be applied to a tibial plateau fracture.

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Nondisplaced fractures of the tibial plateau can often be treated non-operatively with a period of non-weight bearing with a hinged knee brace.

Tibial Plateau Fracture - Sports Injuries, treatment and ...

A tibial plateau fracture occurs at the top of your shin and prevents you from

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being able to place weight on your leg. If you experience trauma to your leg that results in pain, swelling, or a...

Tibial Plateau Fracture - Healthline

The aim of physiotherapy after a fractured tibial plateau or tibial plateau fractures is to help you heal soon. Many objectives that are small are throughout

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the recovery period in the specific exercise to be performed. Changing of exercise over time is the objective.

Physiotherapy and Recovery for Fractured Tibial Plateau or ...

Delayed weight bearing is most important in those who have sustained depression fractures.⁴With stable

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fractures, non-weight-bearing should be maintained for 6-8 wks, with progression to PWB (50%) at that time. After twelve weeks, patients can be full weight bearing if there is radiographic evidence of healing.

Standard of Care: Tibial Plateau Fracture

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The treatment for tibial plateau fractures aims to achieve anatomical reduction of the joint surface and stable osteosynthesis in order to enable early mobilization, so as to prevent complications such as joint stiffness and general post-operative complications such as deep vein thrombosis or pulmonary embolism.

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Tibial Plateau Fractures - Physiopedia

In the first stage of rehabilitation from a tibial plateau fracture, your knee must be immobilized for six to eight weeks to allow your tibial plateau to heal. This is usually done by placing your knee in a cast or solid brace. Like any bone

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fracture, you must allow the bone to heal by keeping it still.

Rehabilitation From Tibial Plateau Knee Surgery | Healthfully

Non displaced tibial plateau fracture. A non-displaced fracture is when the tibia sustains a break or crack without a fragment of the bone becoming

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separated. These normally have a better outcome than displaced fractures and heal without surgical intervention within 3-4 months.

Tibial Plateau Fracture - Symptoms, Causes, Treatment ...

Based on the observation that rehabilitation practices for tibial plateau

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fractures are inconsistent and lack uniformity in the published literature, this scoping review will seek to identify all relevant studies that have reported on rehabilitation for tibial plateau fractures in order to comprehensively map the characteristics of the practices.

Rehabilitation for tibial plateau

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Tibial plateau fracture : Immobilize un-displaced fractures and keep the patient nonweightbearing for 3 months. Tibial tubercle fracture- For un-displaced fractures, immobilize the knee. Isolated midshaft or proximal fibula fracture- Immobilization in a long leg cast generally is not required.

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Standard Treatment Guidelines for Fracture of Tibia

Recovery time depends on the extent and type of fracture. Some shaft fractures of the tibia take as little as four months to heal, with more extreme cases taking a minimum of six months to heal....

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Tibia Fracture: Treatment, Recovery, and More

Ice and modalities to reduce pain and inflammation Use crutches non-weight bearing for 6 weeks Brace for 6 weeks in full extension Elevate the knee above the heart for the first 3 to 5 days

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Tibial Plateau Fracture Post-Operative Protocol ...

(OBQ12.261) A 23-year-old healthy male was involved in a motor vehicle collision and sustained the injury seen in Figure A. Physical examination after ORIF of the plateau fracture revealed a Grade 3 Lachman, varus laxity at both 0 and 30 degrees of knee flexion, and 15 degrees

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of external rotation asymmetry at 30 degrees of knee flexion.

Tibial Plateau Fractures - Trauma - Orthobullets

Fracture of the tibial plateau affects knee alignment, stability and movement. Early detection and appropriate treatment of tibial plateau fractures are

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critical for minimising damage to the knee and reducing the risk of further complications such as osteoarthritis. Treatment is aimed at achieving a stable, aligned, mobile and painless joint as well as minimising the risk of post-traumatic osteoarthritis following the fracture.

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