Discharge Physical Therapy Protocol: Total Knee Arthroplasty

1. Evaluate current status
   a. ROM
   b. Strength
   c. Gait
   d. Upper body strength

2. Goals
   a. ROM: 0 – 120
      b. Active and active-assisted sitting and supine ROM should be used to obtain this goal (preference for sitting)

      **Tips:** For difficulty obtaining 0 degrees extension, you may use the following:
      - Isometric quads with foot resting on a rolled towel or one liter bottle
      - Instruct the patient to lie with operative extremity extended with a pillow under foot for as long and as frequently as possible
      - Prone extension

3. Strength:
   a. NO WEIGHT LIFTING!
   b. Isometric quads, gluteus and hamstring exercises
   c. SLR – Active and active-assisted
   d. BLR – Active in all four directions
   e. Short arc quads – Active and active-assisted
   f. Long arc quads – Active and active-assisted
   g. Seated toe and heel raises
   h. Encourage stationary bike when possible

4. Gait:
   a. WBAT – Bear as much weight as patient can tolerate
   b. Progress from walker → cane → off assistive ambulatory devices as pain, confidence, common sense and balance allow
   c. Knee immobilizer only if needed for safety
   d. May drive when walking comfortably with a cane or approximately four weeks after surgery

5. Discharge when all goals have been met