

**PHYSICAL THERAPY PROTOCOL: AMZ (Anteromedialization/Tibial Tubercle Osteotomy)
with MPFL Reconstruction with Allograft**

Name: _____

Date of Surgery: _____

Diagnosis: _____

Signed: _____

Frequency: 2-3 times per week x 12 weeks

Phase 1 → 0-2 Weeks Post-Op

Weight Bearing:

- Heel touch weight bearing with brace on

Brace:

- On at all times locked in full extension, day and night except for hygiene and home exercises

Range of Motion:

- 0 to 90 degrees

Exercises:

- Calf pumps, quad sets, straight leg raise in brace
- Modalities per PT discretion

Phase 2 → 2-6 Weeks Post-Op

Weight Bearing:

- Heel touch weight bearing with brace

Brace:

- d/c at 6 weeks
- progress brace to unlocked at 0 to 90 degrees

Range of Motion:

- Maintain full extension and progress flexion as tolerated

Exercises:

- Progress non weight bearing flexibility
- Begin floor based core, hip and glute exercises
- Advance quad sets, patellar mobility, and SLR

Phase 3 → 6-8 Weeks Post-Op

- d/c brace
- Full ROM

Weight bearing:

- Progress by 25% each week until full weight bearing with a normalized gait

Exercises:

- Advance closed chain quads, progress balance, core/pelvic and stability work
- Start stationary bike at 6 weeks
- Advance straight leg raise and floor based exercises

Phase 4 → 8 Weeks-4 Months Post-Op

- Full ROM and weight bearing

Exercises:

- Progress flexibility and strengthening, progress functional balance, core, and glute exercises
- Advance bike after 12 weeks
- Add elliptical and swimming after 14 weeks

Phase 5 → 4-6 Months Post-Op

Exercises:

- Max single leg dynamic and static balance
- Glutes/pelvic stability/core and closed chain quad program and home exercise program independent
- Begin sport specific training as tolerated after 16 week after cleared by Dr Makhni