**ROBERT PETTIT, MD**

*Restoring Function. Maximizing Performance.*

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PHYSICAL THERAPY PROTOCOL — FOR THE TREATING THERAPIST

# Knee-Spanning External Fixator (Staged Tibial Plateau / Distal Femur)

*Rehabilitation guideline — individualize per operative note and surgeon instruction · Questions: (513) 441-5639*

## PRECAUTIONS

- STRICT NWB; knee immobilized by frame — no knee ROM attempts.
- Daily pin-site surveillance; teach patient/caregiver care technique.
- Compartment-awareness early: pain out of proportion, tense compartments, pain with passive toe stretch → emergent contact.

## PHASED PROGRESSION

| Phase | WB / Protection | Goals & Interventions | Criteria to Progress |
|---|---|---|---|
| **Frame period (0–3 wk)** | NWB, frame on | Ankle/toe AROM, quad isometrics, UE + contralateral conditioning, transfer/device training, elevation program | Definitive fixation performed |
| **After definitive ORIF** | Per new operative note | Transition to tibial-plateau/distal-femur protocol | — |

*Timeframes are typical; radiographic healing and the operative note govern. DVT prophylaxis per surgeon (default aspirin 81 mg BID × 30 days). Report wound concerns, calf pain/swelling, fever, or neurovascular changes to the office same-day.*

SCAN FOR THE LATEST VERSION ONLINE

robertpettitmd.com/pt-protocols/knee-spanning-external-fixator.pdf

*This handout is for general patient education and does not replace personalized medical advice. Always follow the specific instructions given by Dr. Pettit and your care team.*