

PHYSICAL THERAPY SECTION

CERVICAL FUSION / ARTHROPLASTY

Revised November 2016
Adapted from William Beaumont Army Medical Center

Post-op Davs 1 - 30

Usually not referred to PT until after 30 days of Con Leave C-collar - Per surgeon, wear at night for comfort Sit in chair for all meals Sit at 30+ minute intervals throughout the day Posture education - Use lumbar roll when sitting Pelvic tilts Spinal stabilization ex – in supine, neck supported (no bridging) Upper extremity active motion (AROM) to tolerance Deep breathing exercises Cervical AROM in pain-free range – No PROM (NO Stretching) Gentle 2-finger isometrics Scapular retraction, shoulder shrugs, chin tucks Stationary bike Treadmill – Walking progression program as tolerated Lifting to tolerance with proper body mechanics - Pain free Ice as needed

Goals

Pain control Independent ambulation, mobility and ADLs

Months 1 - 3

Continue appropriate previous exercises
Upper extremity Theraband x 6
Scapular retraction exercises with Theraband
Biceps / triceps strengthening with light weight
UBE
Elliptical trainer
Upper trap / postural stretches
Ergonomics education
TENS and ice to assist with pain relief prn

Goals

Full AROM C-spine Able to lift 20 lbs with ease

Months 3 - 6

Weight training (UE & LE) as tolerated

- No overhead resistance exercises Work
hardening / MOS specific exercises Theraband PNF
with lumbar stabilization principles Push-up progression
Sit-up progression
Treadmill – Running progression program

Goals if fused, pain-free and reconditioned

Pass APFT at 6 months post-op Resume all activities at 6 months post-op

Months 6+

Functional training exercises for sports or work specific activities Progressive weight training High impact / aerobic activity May begin wearing Kevlar and carrying rifle May begin contact sports