



Orthopaedic Protocols

Post-Surgical Rehabilitation Protocol: Lumbar Laminectomy/Discectomy/Fusion

I. Post Op Days 1-3:

- Bed Mobility/Positioning
 - Log rolling, instruct in proper transfers (Sit to stand, out of bed (OOB) to chair, car)
 - Place pillow between knees when sidelying
 - Place pillow under knees when supine
- Coresit donning/doffing (putting on and taking off)
- Ambulation progression as tolerated with assistive device. (walker/cane)
- Exercises: ankle pumps, glut sets, quad sets, add squeeze, LAQ, UE movement
- Diaphragmatic Breathing
- Posture Education
 - Towel roll/lumbar roll when sitting as tolerated
 - Maintain neutral posture
- Restrictions/Guidelines
 - Sit in chair for all meals 15-30 minutes
 - No lifting over 5 lbs.
 - No bending past 70 degrees hip flexion
- Discectomy:
 - No twisting
- Laminectomy:
 - May sit s limitations

II. Post Op weeks 4-6: (start outpt. PT)

A. Evaluation:

- Prior level of function (PLOF)
- Range of motion (ROM)
- Posture
- Muscle tone
- Radicular symptoms
- General strength
- Transfers
- Gait

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B. Ther Ex:

- LE Stretching: HS, quad, gastroc/soleus, hip flexors
- Back Stretches: knee to chest, supine rotation, piriformis, prone extension as tolerated
- Lx Stabilization Ex's
- Pool therapy as indicated
- Treadmill walking progression program
- Wall Squats
- May begin lifting and bending using proper mechanics (10-20#)
- General UE/LE strengthening

C. Modalities/Manual:

- For pain relief, m. spasm

III. Post Op Months 2-6:

- Continue c above ex's
- Functional training ex's for sports or work specific activities
- Running progression program
- Resume all activities at 6 months post op
- Possible FCE referral