Post-Surgical Rehabilitation Protocol:  
Lumbar Laminectomy/Diskectomy/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
- Corest 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
- Diskectomy:
  - 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
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