

## ACDF PHYSICAL THERAPY POST OP PROTOCOL

### PHASE 1 – 0 to 4 WEEKS (WOUND HEALING AND PROTECTION)

**OBJECTIVES:** Reduce pain and inflammation and minimize any increases in upper extremity radicular symptoms.

**PRECAUTIONS:** No passive stretching. Patient allowed to move into gentle flexion, extension, and retraction active range of motion in pain free range – supported in supine (without collar). Avoid bending, twisting, lifting, pushing and pulling > 15 lbs. for 4 weeks.

#### BRACING:

1 LEVEL FUSION – NO BRACE

2 LEVEL FUSION – BRACE FOR 4 WEEKS

3+ LEVEL FUSION – BRACE FOR 6 WEEKS (PER DOCTOR)

#### ROM LIMITS:

GENTLE CERVICAL ACTIVE RANGE OF MOTION WITHIN PAIN FREE RANGE FOR 6 WEEKS POST OP

-NORMAL MOVEMENTS WITH ADL ACTIVITIES ARE OK WITH BRACE ON.

-OBSERVE ANTERIOR INCISION – GIVE INSTRUCTION ON KEEPING AREA CLEAN, LIGHT “DABBING” WITH WARM CLEAN WASHCLOTH TO REMOVE SURGICAL GLUE

-DO NOT APPLY LOTION/BALMS/OINTMENTS/OILS TO INCISION.

-OBSERVE FOR ANY DRAINAGE – KEEP COVERED IF ANY DRAINAGE

#### PHYSICAL THERAPY:

#### EDUCATION:

**BODY MECHANICS:** LIGHT LIFTING < 15 LBS., TRANSFERS, LOG ROLLING, POSITIONING (SLEEP) WITH NECK SUPPORTED.

**POSTURE EDUCATION:** SITTING IN NEUTRAL WITHOUT FORWARD HEAD, CHANGING POSITION EVERY 30 MIN., AVOID PROLONGED FLEXION – (PHONES, TABLETS, BOOKS)

**DRIVING:** ALLOWED WHEN OFF NARCOTIC PAIN MEDICATION AND OUT OF COLLAR (2-4 WEEKS)

#### EXERCISES:

-SUPPORTED CHIN TUCK

-CERVICAL AROM: GENTLE PAIN FREE RANGE – USE LASER IF AVAILABLE – EMPHASIS ON SLOW CONTROLLED

-ISOMETRICS – GENTLE INTO FLEXION, ROTATION, AND SIDE BEND

-STRETCHING TO PECS AND UPPER THORACIC

-SUPINE WITH LONGITUDINAL TOWEL ROLL

- “W” -SUPPORTED ARM SLIDES ON BED

-SCAPULAR RETRACTION IN SITTING AND STANDING

-CARDIO: STATIONARY BIKE OR WALKING 2X/DAY START 10 MIN. – WORK UP TO 20 MIN.

**NOTIFY DOCTOR IF ANY SIGNS OF INFECTION, SWELLING, DIFFICULTY BREATHING OR WORSENING OF RADICULAR SYMPTOMS/WEAKNESS.**

**PHASE 2 – 4 TO 8 WEEKS – STRENGTHENING**

**OBJECTIVES: IMPROVE SCAR TISSUE MOBILITY AND REVIEW BODY MECHANICS TO MINIMIZE HEAD FORWARD POSITION. POST OP XRAYS INDICATE BONEY INCORPORATION AROUND FUSION.**

**-PATIENT TO HAVE GOOD CERVICAL NEUROMUSCULAR CONTROL – INITIATE LIGHT STRENGTHENING WITH UPPER EXTREMITIES/NECK STABILIZATION AND INCREASE AEROBIC ENDURANCE TO 30+ MIN.**

**INITIATE PHASE 2 EXERCISES WHEN PATIENT IS ABLE TO COMPLETE PHASE 1 EXERCISES WITHOUT INCREASE IN PAIN/SYMPTOMS AND DOCTOR ALLOWS WEANING OUT OF BRACE**

**PHYSICAL THERAPY:**

**POSTURE EDUCATION REVIEW:**

**SITTING IN NEUTRAL MINIMIZING FORWARD HEAD, ADJUST WORKSTATION FOR BETTER ERGONOMICS (ISSUE WORKSTATION SETUP HANDOUT), CHANGING POSITION EVERY 30 MIN., AVOID PROLONGED FLEXION > 15 MIN./TIME USING PHONE, TABLETS, HANDWORK ETC.**

**CARDIO GUIDELINES:**

**ACTIVITIES BEYOND 4 WEEKS CAN ONLY BE DONE IF ALLOWED TO WEAN OFF BRACE**

**STATIONARY BIKE: 2 WEEKS**  
**ELLIPTICAL/HIKING/PILATES: 4 WEEKS**  
**RUNNING: 12 WEEKS**  
**YOGA, OUTDOOR BIKING, SWIMMING: 3 MONTHS**  
**SKIING: 4 MONTHS**  
**GOLF/BASKETBALL/SOCCER: 4-6 MONTHS**

**NO LIFTING > 15 LBS. FOR 12 WEEKS. NO IMPACT ACTIVITIES FOR 12 WEEKS.**

**EXERCISES:**

**POSTURAL STRENGTHENING**

- PRONE SCAPULAR STRENGTH (T 's)
- THERABAND ROWS, STRAIGHT ARM PULLDOWNS, HORIZONTAL ABDUCTION ETC. USING TA STAB.
- MACHINE ROWS, LAT PULLDOWN (KEEP BAR IN FRONT OF HEAD), PALLOF PRESS, TRICEP PRESS DOWN
- SEATED BALL-ALTERNATING BICEP CURLS < 10 LBS.
- UPPER BODY ERGOMETER (LIGHT TO MOD.)
- WALKING 30+ MIN. / DAY

**CERVICAL POSTURAL STRENGTHENING**

- PRONE ON ELBOWS/QUADRUPED – CERVICAL RETRACTION, ADD ¼ NECK ROTATION AND LOOK FORWARD
- WALL BALL – (SMALL PLAYBALL) NECK SIDE BEND
- SEATED RETRACTION WITH THERABAND