





CERVICAL PSIF PHYSICAL THERAPY POST OP PROTOCOL

PHASE 1 0 - 2 WEEKS | WOUND HEALING AND PROTECTION

OBJECTIVES

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

RESTRICTIONS

MOVEMENT

- No passive stretching to neck.
- Patient allowed to move into gentle flexion, extension active range of motion in pain free range – supported in supine (without collar).
- Minimize end range rotation.
- Avoid bending, twisting, lifting, pushing and pulling > 15 lbs. for 4 weeks.
- Gentle cervical AROM within pain free limits.
- Limited end range rotation and side bending for 6 weeks post op.
- No overhead activities for 6 (six) weeks.
- No lifting of > 15 lbs. for 12 (twelve) weeks.
- No impact activities for 12 (twelve) weeks.

o BRACE

- 1 Level Fusion No brace.
- 2 Level Fusion Wear brace for 4 6 weeks.
- 3+ Level Fusion Wear brace for 6 (six) weeks.
- Normal movements with ADL activities are ok with a brace.
- Always wear a brace while riding in a motor vehicle 6 (six) weeks.

PROCEDURE

- Posterior cervical midline incision
- Head clamp used for positioning.
- All myelopathic patients and posterior cervical patients will have neuromonitoring during the procedure.
- This involves the placement of electrode needles throughout the scalp as well as lower and upper extremities.
- This can be a source of soreness/random bruising and or rash from tape removal post operatively.
- Some patients may be issued bone growth stimulators (osteopenic). This is typically worn 6 (six) months to a year post operatively.

WOUND CARE

[DERMABOND CLOSURE]

- Surgical site incision is ok to get wet.
- Do NOT submerge.
- Do NOT apply lotion/balms/ointments/oils to incision.
- Slight drainage is common, keep covered
- Report any clear drainage with/without postural headaches to surgeon ASAP.







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Report any clear drainage with/without postural headaches to surgeon ASAP.

PHASE 1

0 - 2 WEEKS | WOUND HEALING AND PROTECTION

PHYSICAL THERAPY

Education

- BRACE
 - You may remove your collar 3-4 times a day for up to one (1) hour with the neck supported. Do NOT flex or extend neck). Sleep with your collar on for the first 4-6 weeks.
- o BODY MECHNICS
 - Lifting is restricted to <15LBS. for 12 (twelve) weeks.
 - Work on positioning for sleep. It is best if the head of your bed is angled up at 30 degrees using pillows or a recliner for the first 7-10 days to reduce swelling.
 - Sleep on your side or back.
- POSTURE
 - Sitting in neutral without forward head change position every 30 minutes.
 - Avoid prolonged flexion (Phones, tablets, computers, books.)
- DRIVING
 - Allowed when out of collar and off narcotic pain medication at 4-6 weeks.
 - You must be able to turn your head and check your mirrors.

Exercises

- CERVICAL AROM
 - Gentle pain free range. Use laser if available. Emphasis on slow and controlled.
- ISOMETRICS
 - Supported supine isometric chin tuck.
 - Gentle into flexion/extension and neutral rotation/S.B.
- STRETCHING
 - Stretching to pecs and upper thoracic spine
 - Supine with longitudinal towel roll "W"
 - Supported arm slides below top of head.
 - Scapular retraction in sitting and standing.
- CARDIO
 - Stationary bike or walking 2x/day
 - Start at 10 minutes and work up to 20 minutes.
 - Avoid prolonged flexion (Phones, tablets, computers, books.)

Notify your surgeon if you show any signs of infection, swelling, difficulty breathing or worsening of radicular symptoms/weakness. Call if you have a fever > 101 degrees F or severe headaches that are worse when sitting upright and relieved when laying down.







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PHASE 2 4 - 8 WEEKS | STRENGTHENING & STABILIZATION (OUTPATIENT PT)

OBJECTIVES

- Improve scar tissue mobility and review body mechanics to minimize head forward position.
- Initiate phase 2 exercises when patient demonstrates good neuromuscular control as weaning out of brace and able to complete phase 1 exercises without increases in pain/symptoms and doctor recheck allows final weaning out of brace.

IMAGING

Post-Operative x-rays at 6 (six) weeks to check for boney incorporation of fusion.

PHYSICAL THERAPY

Education

- POSTURE
 - Sitting in neutral and minimizing forward head.
 - Adjust workstation for better ergonomics. (Issue workstations setup handout)

Exercises

- Postural strengthening (cervical)
- o Initiate pushing/pulling with arms (Theraband)
- Upper body ergometer (light to moderate)
- Walking 30 minutes + per day.
- CARDIO
 - Stationary bike or walking with a brace
 - Elliptical/hiking/Pilates | 4 (four) weeks.
 - Jogging/outdoor biking | 12 (twelve) weeks.
 - Swimming | 12 (twelve) weeks)
 - Skiing/Golf/Basketball/Soccer | 16 24 weeks