

Lumbar Fusion Rehabilitation Protocol

Precautions

Avoid flexion ROM and exercises for 6 weeks.
For 3 months, avoid rotation and extension beyond neutral

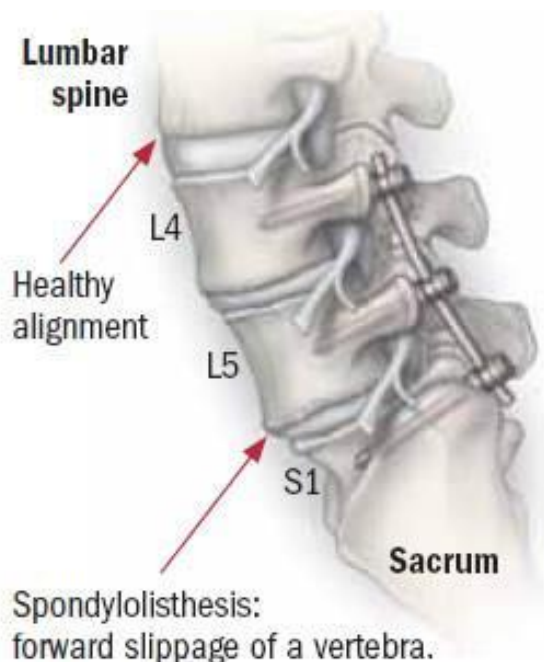
Avoid ROM at fusion level, therefore no lumbar joint mobilisations for 6 weeks

Avoid excessive loading and distraction

For 4-6 weeks, no driving and only for short intervals after consulting surgeon

For 6 weeks, avoid lifting heavy objects

For 4-6 weeks, sitting for 20-minute intervals/as tolerated, then progress slowly to 30-40 minutes several times per day.



Phase 1 (Weeks 0-4)

Patients sometimes must wear a soft brace for multilevel fusions

- Electrotherapy as appropriate
- Soft tissue work and scar tissue management as appropriate
- Ambulation progression as tolerated with use of assistive device as needed
- Log rolling
- Place pillow between knees in side lying and pillow under knees when supine
- Include isometric transversus abdominis contraction with all exercises
- Ankle pumps, quad, hamstring, and glute sets, heel slides, SLR, SAQ, LAQ, isometric hip adduction,
- Crook lying knee fall out, Seated hip abduction, Scapular retraction

Phase 2 (Weeks 4-8)

- Continue above exercises and modalities
- Cardiovascular endurance
- Mini squats, lunges, step-ups, wall press (single/double leg), side lying CLAM shells/reverse CLAM shells
- Balance progression (SLS, SLS eyes closed, SLS UE movement)
- Supine neutral spine with arm and leg movements (marching, dying bug)
- Theraband exercises (rows and lat pull downs)
- Push up progression (wall to table to floor)
- Stretching of hamstrings, quads, gastroc/soleus, and hip flexors

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Phase 3 (Weeks 8-12)

- Continue above exercises and modalities
- Stationary bicycle
- Wall slides, Bridges
- Advanced core stabilisation exercises with emphasis on prone and quadruped positions
- Bird-dog
- Advance UE and LE resisted activities

Phase 4 (Weeks 12+)

- Return to function, work simulated activities with progression of lifting, pushing, and pulling
- Bridge progression (UE to 90 degrees to alternating knee extension to unilateral)
- Prone walk out on swiss ball
- Planks, as tolerated, starting from knees
- Work conditioning program as needed
- At 6 months post-op, begin rotational and supine flexion stretching