

Name _____

Date _____

Physician _____



Patient Flow Sheet

proaxistherapy™

Total Knee Arthroplasty (TKA)

Concentrating on mobility (100-130 degrees/or pre-op flexion) before strengthening will greatly increase the lifespan of the replacement. Determine desired functional level based on prosthesis, patient's prior activity level and goals, and clearance from physician

Phase 1 – AGGRESSIVE MOTION

Weeks 0-6

Focus on mobility, not strength

Minimize swelling/effusion. If swelling increases, work to decrease before progressing PROM and AROM activities, symmetric mm flexibility (ham stretch, heel slides, quad stretch) Patellar mobilizations, with emphasis on scar mobilization

Quad sets (NMES, Biofeedback) progressing to SLR

**Goals: 100°-130° of flexion or pre-op flexion, 0° of extension, 3x30 SLR flexion without extensor lag*

Phase 2 - STRENGTH

Weeks 7-12

Gait normalization

Balance progression

Squatting, step ups, shuttle, bridging progressions

Core strengthening program

Develop joint-friendly cardiovascular program

**Goals: Functional mobility, functional reach > 10 inches, normal walking gait*

Phase 3 – MAINTENANCE AND REINTEGRATION TO REMAINING IADL'S

Weeks 13+

Prepare for specific lifetime activities with a long term, functional program that protects the joint.

Continue focus on cardiovascular and core conditioning

**Goals: functional return to iADL's, individualized to patient expectations*

Surgeon Comments:

proaxistherapy™