



**PHYSICAL THERAPY CONSULT**

Preoperative  Postoperative only;  Nonoperative

**PLEASE CALL ONE OF THE LISTED P.T. OFFICES OF YOUR CHOICE FROM THE P.T. OFFICES LISTED ON OUR WEBSITE: [www.AlpineOrthoSpine.com](http://www.AlpineOrthoSpine.com)**

**Patient:** \_\_\_\_\_

**Diagnosis/Surgical Procedure:** \_\_\_\_\_

**TREATMENT:**

Joint Mobilization;  PROM;  AROM;  Isokinetic Training;  Active-Assisted;  WORK Conditioning;  Pool Therapy;  WORK HARDENING;  FUNCTIONAL CAPACITY EVALUATION{  **test to tolerance** };  Desensitization for CRPS;  Gait Training with assistance devise of choice[cane, walker, crutches];  Proprioception;  **Home exercise program**;  Massage Therapy;  May take brace off for PT;  May take brace off/on while sitting or standing;  **10 repetition rule**;  **PGAP {Progressive Goal Attainment Program...Ryenne...360-902-5035}**;  **SIMP PROGRAM[ST LUKES REHABILITATION INSTITUTE]: 473-6159 [NATALIA] [WAL & I only]**;  PRONE QUADRICEPS AND ILIOPSOAS STRETCHING;  PRONE HAMSTRING HANGING OFF LEDGE

Weightbearing status: NWB=non-weightbearing; PWB=partial weightbearing; TTWB=toe-touch weight bearing; FWB=full weightbearing; S=sling; SI=shoulder immobilizer; HKB=hinged knee brace[with ROM setting]; WBAT=weightbearing as tolerated

	UPPER EXTREMITY	LOWER EXTREMITY
RIGHT		
LEFT		

**Modalities:**  ANY MODALITY OF CHOICE;  Electrical stimulation;  Iontophoresis;  Biofeedback;  Cold or heat therapy;  Dynasplint;  Ultrasound;  TENS;  Phonophoresis;  Massage therapy

**GUIDELINES:** { \*on website: [www.AlpineOrthoSpine.com](http://www.AlpineOrthoSpine.com) }

**SHOULDER:**  SLAP Repair\*;  Adhesive Capsulitis Resection & MUA\*;  Rotator cuff repair\*;  Shoulder Biceps tenodesis\*;  Subacromial decompression without Rotator Cuff Repair\*;  Open Bankart repair or capsulorrhaphy\*;  Total Shoulder Replacement\*;  Rotator cuff strengthening;  Anterior Capsulorrhaphy\*;  Posterior Capsulorrhaphy\*;  Scapulothoracic strengthening

**CERVICAL SPINE:**  AROM/PROM & strengthening/Bilateral upper extremity and shoulder girdle mobilization;  Cervical traction;  Cervical traction home unit;  Brachial plexus stretching and “glides”;  Avoid neck ROM

**THORACOLUMBOSACRAL SPINE:**  AROM/PROM strengthening;  Modified McKenzie protocol\*;  Modified Williams flexion protocol\*;  Core Strengthening;  AROM/PROM of B Hip/Knee/Ankles;  BACK SCHOOL;  Lumbar plexus stretching and “glides”;  **No rotation or lateral bending of T-L spine**;  SI belt

**HIP:**  Total Hip Replacement{Direct Lateral Approach}\*;  Total Hip Replacement{Posterior Approach}\*

**KNEE:**  ACLR with Cartilage Repair\*;  ACLR without Cartilage Repair\*;  Chondral Repair\*;  Distal Patellofemoral Realignment\*;  Total Knee Replacement\*;  Extensor Mechanism Repair\*;  PCLR WITHOUT Cartilage Repair\*;  PCLR WITH Cartilage Repair\*;  Proximal Patellofemoral Realignment\*;  Knee Periarticular Fracture rehabilitation protocol\*;  Non-operative Patellofemoral program\*;  MCL tear rehabilitation protocol\*

**FOOT & ANKLE:**  Achilles Tendon Repair\*;  Ankle proprioception

**FUNCTIONAL REHABILITATION:**  Interval Tennis Program\*;  Interval Golf Program\*;  Interval Throwing Program\*;  Functional Rehabilitation(Running)\*

**Visits per week:** \_\_\_\_\_; **Number of weeks:** \_\_\_\_\_; **Date:** \_\_\_\_\_

**Signed:** \_\_\_\_\_  Miguel Schmitz, MD;  Ryan Saunders, PA-C;  Chase Kaufman, PA-C