Anterior Cervical Total Disc Replacement
REHABILITATION PROTOCOL

Phase I: Protection Phase/Immediate Motion (0 – 6 Weeks post-op)

0-3 Weeks post-op:
- No PT or the first 3 weeks
- Gradual return to ADL’s at home
- MD follow up at 3 weeks post op to clear for PT

3-6 Weeks post-op:
- UBE no resistance
- Manage pain and swelling/modalities prn
- Monitor wounds for breakdown or infection
- Light resistance upper extremity exercises: 0-5 lbs.
  - Use massage face cradle for prone exercises to avoid excessive cervical extension
  - Scapulothoracic
  - Posture training
- Home program review/posture education
- Focus on flexion/extension/rotation/lateral bending
- Okay to start PROM and light AROM or stretching of cervical spine
- Initiate neutral spine core stability training on treatment table: hook lying TA training, diaphragmatic breathing, lumbar multifidi training, etc.
- Soft tissue mobility on thoracic, cervical, upper traps
- Increase activity tolerance

Phase II: Intermediate Phase (6 -12 Weeks post-op)

6-8 Weeks post-op:
- Continue UBE for UE aerobic conditioning
- Manage pain and swelling, modalities prn
- May begin cervical isometrics in neutral
- May begin neural glides/mobilizations. Do not reproduce symptoms
- Progress UE strengthening, scapulothoracic stability, activity tolerance
- Continue neutral spine core stability training on mat. Okay to initiate sitting and standing neutral spine stability training.
- Initiate sub max cervical isometrics
- Continue soft tissue mobility
- May begin grade II joint mobilizations on spinal segments. No joint mobilizations within 2 segments adjacent to replacement
8-12 Weeks post-op:
- Continue UBE, may progress to elliptical, recumbent bike, treadmill walking
- Progress UE strengthening, scapulothoracic stability, activity tolerance
- Initiate sagittal plane core stability training, continue to avoid extension in cervical spine
- Continue soft tissue mobility, modalities, as needed
- Continue joint mobilizations on spinal segments. No joint mobilizations within 2 segments adjacent to replacement

Phase III: Advanced Strengthening Phase (12 - 16 Weeks post-op)

12-15 Weeks post-op:
- Continue cardio equipment as tolerated
- May begin straight line jogging
- Introduce core training in transverse and frontal planes progressing to multi planar
- Un-restricted upper/lower body strengthening.
- Initiate plyometric program

16 Weeks post-op:
- Continue with all ROM, flexibility, stretching, strengthening and plyometric exercises
- Initiate interval sport program if applicable after consultation with physician

Phase IV: Return to Activity Phase (16 – 24 weeks post-op)
- Continue with established strength and flexibility programs
- Continue to comply to interval sport program with gradual return to recreation/sport
- Criteria for return to play:
  - Satisfactory ROM, Strength, and Clinical Exam
  - Satisfactory completion of interval sport program
  - Physician approval