

# Rehabilitation and Recovery Program After Cervical Spine Procedures

## Precautions

- Do not lift more than 10 pounds until you are cleared by your doctor (a gallon of water weighs about 8 pounds).
- Do not sit for more than 30 minutes at a time to prevent compression of the discs in your neck.
- Avoid pulling with both arms at the same time.
- Do not begin neck *range of motion* (ROM) or *cervical isometric exercises* (exercises that tighten the muscles of the neck) until cleared by your doctor.

## Therapy Goals

1. To become as independent as possible with your mobility and exercises.
2. To demonstrate proper body mechanics when moving around and doing activities of daily living (ADLs).
3. To understand the reasons for these precautions and activity guidelines:
  - a. Reducing post-surgical pain
  - b. Protecting your post-surgical incision
  - c. Promoting healing of surgical site

## Body Mechanics

- It is important to use proper body mechanics to protect your spine by keeping it aligned.
- When getting in and out of bed, log-roll to your side and sit up at edge of bed without twisting.
- This reduces strain on your spine and maintains good alignment.



## Sitting Posture

- Avoid soft chairs. Choose chairs that support good posture. A lumbar roll may help (see the image with the check mark).
- Activate your abdominal muscles and “grow tall.” Maintain this good upright posture to strengthen the muscles that support your back and neck.
- Use pillows under your forearms to keep strain off neck when sitting in chair or bed (see the bottom image).



## Standing Posture

- Keep your head lined up directly over your shoulders, hips, and ankles.

## Sleeping Posture

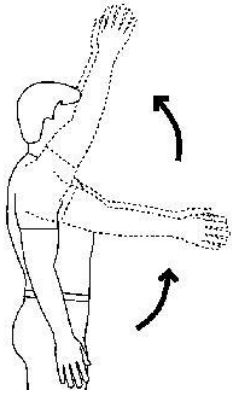


- Use one small pillow to keep your neck in a neutral position (not bent) while you sleep.
- You may use a small rolled towel at the base of the pillow for further support if needed (see the image above).

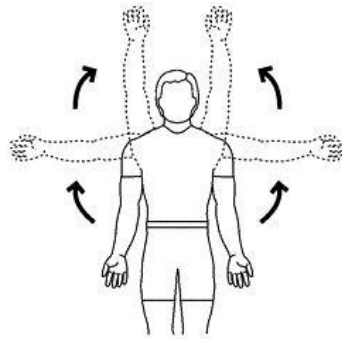


- When lying on your side, put a pillow between your legs to minimize twisting. A pillow in front of you will keep your upper body from twisting. Keep your head in a neutral position with a pillow.

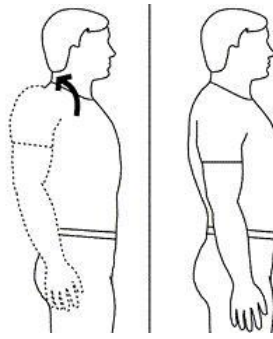
## Shoulder Range of Motion



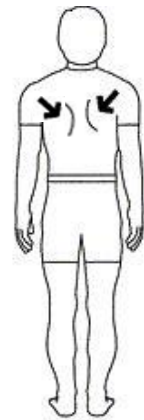
Front arm raises



Side arm raises



Shoulder circles



Scapular squeezes

## Post-Operative Walking Program

- **It is important for you to walk every day.** Walking helps your heart, lungs, and spine get stronger.
- Walk at a comfortable pace and **stand up straight** with whatever walking device you use.
- Walk on level ground (a smooth surface if possible) for the first several weeks.
- When you first get home, you may only be able to take short walks. Aim to take a few walks each day. Start by walking in your home and gradually increase time and distance each day.
- **2- to 3-week goal:** Walk for 30 minutes, 7 times a week.
- **3- to 6-week goal:** Walk for 30 to 60 minutes, 5 to 7 times a week.
- If there are days that you cannot take a long walk, take several short walks indoors to keep moving.
- **Stairs:** You do not need to avoid stairs if you can use them safely. Walking up and down stairs will help increase your strength. Follow your physical therapist's instructions for stair safety.

## Helpful Hints

- Plan and prioritize your day to spread your tasks throughout the day to avoid overdoing it. Plan to do your exercises twice a day.
- Rearrange your household items so that the most commonly used things are kept between waist and shoulder height. Work at counters that are a height that allows you to keep good posture.
- Sit in a supportive chair to put on pants, socks, and shoes. To keep a straight back while doing these tasks, cross your ankle over your opposite knee and bend from your hips. If needed, an *occupational therapist* (OT) may train you to use adaptive devices.
- Do **not** drive until your physician says it is okay to do so. You may need to take breaks on your ride home, to be sure that you do not sit for too long (do not sit still for more than 30 minutes).
- When picking items up from the ground, maintain a neutral spine (not bent). Activate your abdominal muscles while you bend your knees. Use adaptive equipment such as a reacher as instructed by your OT.
- Change positions carefully, as dizziness and fatigue are common after surgery.

**Questions?** Please call your clinic or send a MyChart message to your provider if you have questions or concerns.