Treatment Guides - Section 1

Interventions

Balance

Fall Risk Assessment and Prevention

Functional Mobility

Gait

Therapeutic Exercise

Conditions and Diseases

Adhesive Capsulitis

Alzheimer's Disease and Related Dementias - Mid Stage

Alzheimer's Disease and Related Dementias - Late Stage

Amputation of the Lower Limb

Amyotrophic Lateral Sclerosis

Ankle Sprain

Ankylosing Spondylitis

Biceps Tendinitis

Breast Cancer - Pre and Postoperative Management

Burn Injury

Cancer

Cardiac Disease

Cardiac Surgery

Carpal Tunnel Syndrome - Conservative Management

Carpal Tunnel Syndrome - Postoperative Management

Cervical Stenosis, Myelopathy, and Radiculopathy

Cervical Spine Surgery

Chronic Obstructive Pulmonary Disease

Chronic/Persistent Pain Syndrome

Complex Regional Pain Syndrome Type I

Congestive Heart Failure (see Cardiac Disease)

Cubital Tunnel Syndrome - Conservative Management

Cubital Tunnel Syndrome - Postoperative Management

De Quervain's Syndrome - Conservative Management

De Quervain's Syndrome - Postoperative Management

Diabetes - Type

Dizziness

Emphysema (see Chronic Obstructive Pulmonary Disease)

Epicondylitis - Conservative Management

Fracture of the Ankle (Lateral/Medial/Posterior Malleolus)

Fracture of the Elbow (Radial Head/Olecranon/Distal Humerus)

Fracture of the Hip (Proximal Femur)

Fracture of the Knee (Tibial Plateau/Patella)

Fracture of the Shoulder (Proximal Humerus)

Fracture of the Wrist (Distal Radius)

Treatment Guides - Section 1

Conditions and Diseases

Frailty and Debility

Greater Trochanteric Pain Syndrome

Guillain-Barré Syndrome

Huntington's Disease

Joint Contractures

Kidney Disease

Low Back Pain - Acute

Low Back Pain - Chronic (see Chronic/Persistent Pain Syndrome)

Low Back Pain - Sacroiliac Joint

Lumbar Stenosis

Lumbar Spine Surgery

Morbid Obesity - Person of Size

Multiple Sclerosis

Myasthenia Gravis - Generalized

Myocardial Infarction

Osteoarthritis - Conservative Management

Osteoporosis

Palliative Care and Hospice

Parkinson's Disease - Early Stage

Parkinson's Disease - Mid Stage

Parkinson's Disease - Late Stage

Peripheral Neuropathy

Peripheral Vascular Disease

Piriformis Syndrome

Plantar Fasciitis

Post-Poliomyelitis Syndrome

Pressure Ulcers

Rheumatoid Arthritis - Conservative Management

Rotator Cuff Pathology - Conservative Management

Rotator Cuff Pathology - Postoperative Management

Scleroderma/Systemic Sclerosis

Spinal Cord Injury - Paraplegia T1-S5

Spinal Cord Injury - Tetraplegia/Quadriplegia C1-8

Stroke

Total Ankle Replacement (Arthroplasty)

Total Hip Replacement (Arthroplasty)

Total Knee Replacement (Arthroplasty)

Total Shoulder Replacement (Arthroplasty)

Urinary Incontinence

Vertebral Compression Fracture

Functional Mobility - Section 2

Adaptive Equipment

Adaptive Equipment for Bathing

Adaptive Equipment for Mobility

Adaptive Equipment for Moving in Bed

Adaptive Equipment for Transfers

Adaptive Equipment for Using the Bathroom

Adaptive Equipment for Walking

Ambulation

Walk with a Cane on the Stronger, Left Side

Walk with a Cane on the Stronger, Right Side

Walk with a Standard Walker - Full Weight Bearing

Walk with a Standard Walker - Non-Weight Bearing

Walk with a Standard Walker - Partial Weight Bearing

Walk with a Standard Walker - Toe-Touch Weight Bearing

Walk with a Standard Walker - Weight Bearing as Tolerated

Walk with a Wheeled Walker - Full Weight Bearing

Walk with a Wheeled Walker - Weight Bearing as Tolerated

Bath Transfers

Transfer to Shower Chair (back up, turn left)

Transfer to Shower Chair (back up, turn right)

Transfer to Shower Chair (left leg, right leg, sit)

Transfer to Shower Chair (right leg, left leg, sit)

Transfer to Shower Chair (left leg, sit, right leg)

Transfer to Shower Chair (right leg, sit, left leg)

Transfer to Tub Bench - After Hip Surgery (back up, turn left)

Transfer to Tub Bench - After Hip Surgery (back up, turn right)

Transfer to Tub Bench (back up, turn left)

Transfer to Tub Bench (back up, turn right)

Transfer Wheelchair to Tub Bench - Move to the Left

Transfer Wheelchair to Tub Bench - Move to the Right

Bed Mobility

Bridging

In and Out of Bed - Toward Your Left Side

In and Out of Bed - Toward Your Left Side After Hip Surgery

In and Out of Bed - Toward Your Left Side Log Rolling

In and Out of Bed - Toward Your Right Side

In and Out of Bed - Toward Your Right Side After Hip Surgery

In and Out of Bed - Toward Your Right Side Log Rolling

In and Out of Bed - Toward Your Weaker Left Side

In and Out of Bed - Toward Your Weaker Right Side

In and Out of Bed with Help - Toward Their Left Side

In and Out of Bed with Help - Toward Their Right Side

Functional Mobility - Section 2

Bed Mobility

Move From One Side of the Bed to the Other

Move Up in Bed

Roll onto Your Left Side

Roll onto Your Right Side

Stairs

Down a Curb or Single Step Using a Walker

Down Steps with a Rail Using a Cane

Down Steps with a Rail Using a Closed Walker

Down Steps with a Rail Using an Open Walker

Down Steps without a Rail Using a Cane

Up a Curb or Single Step Using a Walker

Up Steps with a Rail Using a Cane

Up Steps with a Rail Using a Closed Walker

Up Steps with a Rail Using an Open Walker

Up Steps without a Rail Using a Cane

Transfers

Car Transfer

Get Down On the Floor

Get Up From the Floor

Sit-Pivot Transfer - Move to the Left

Sit-Pivot Transfer - Move to the Right

Sit-Pivot Transfer with Help - Move to Their Left

Sit-Pivot Transfer with Help - Move to Their Right

Sitting Down

Sitting Down - After Hip Surgery

Standing Up

Standing Up - After Hip Surgery

Standing Up with Help

Stand-Pivot Transfer with Help - Move to Their Left

Stand-Pivot Transfer with Help - Move to Their Right

Transfer Board - Move to the Left

Transfer Board - Move to the Right

Wheelchair Mobility

Wheelchair Mobility

Educational Handouts - Section 3

Amputation of the Lower Limb

Care of the Prosthesis and Lower Limb Coverings

Care of Your Residual Limb

Phantom Limb Pain

Position Your Residual Limb - AKA

Position Your Residual Limb - BKA

Cardiopulmonary

Breathing Distress - Causes and Tips to Prevent

Breathing Distress Control

Cardiac Precautions for Exercise - Therapist Resource

Controlled Cough

Daily Tasks after Open Heart Surgery

Deep (Diaphragmatic) Breathing

How to Check Your Heart Rate

Postural Drainage - Chest Percussion

Postural Drainage Positions

Pursed Lip Breathing

Sternal (Breastbone) Precautions

Tips to Conserve Energy

Other

Arm Measurement

Check Your Skin

Leg Measurement

Pain Journal

Position in Bed to Reduce Pressure

Pressure Relief

Stress Management

Stress Management - Relaxation Tools

Tips to Prevent Lower Body Lymphedema

Tips to Prevent Upper Body Lymphedema

Neurological

Cognitive Strategies to Improve Movement

Position in Bed - Left Side Weakness

Position in Bed - Right Side Weakness

Position Your Arm - Left Side Weakness

Position Your Arm - Right Side Weakness

Protect the Arm - Left Side Weakness

Protect the Arm - Right Side Weakness

Orthopedic

Body Mechanics

Daily Tasks after Back (Lumbar) Surgery

Daily Tasks after Neck (Cervical) Surgery

Educational Handouts - Section 3

Orthopedic

Daily Tasks after Shoulder Surgery

Desensitization

Edema (Swelling) Control of the Arm(s)

Edema (Swelling) Control of the Leg(s)

Good Posture

Hip Dislocation Precautions - Posterior Approach

Joint Protection and Energy Conservation for Wheelchair Users

Scar Massage

Self Traction (Unloading)

Spinal Surgery Precautions

Splint/Brace Instructions

Superficial Cold

Superficial Heat

Safety

Don't Let a Fall Get You Down - Booklet

Don't Let a Fall Get You Down Post - Fall Survey

Fall Triggers and Tips to Prevent Falls - Therapist Resource

Foot Care and Foot Safety

Home Safety Assessment - Therapist Resource

Using a Front Wheel Walker (2 wheels)

Using a Rollator (3 or 4 wheels)

Using a Standard Walker (no wheels)

Using a Wheelchair

Therapeutic Exercise Handouts - Section 4

Back/Core Exercises

Core Exercise Guidelines

Core Exercises - Back Muscles

Core Exercises - Pelvic Muscles

Core Exercises - Stomach Muscles

Exercise Ball Guidelines

Exercise Ball - Back Muscles

Exercise Ball - Pelvic Muscles

Exercise Ball - Stomach Muscles

Low Back Stretches

Trunk Active Range of Motion

Balance Exercises

Balance Exercise Guidelines

Balance Exercises - Sitting

Balance Exercises - Standing

Condition Specific Exercise Programs

Above Knee Amputation Exercises

Below Knee Amputation Exercises

Burn Injury Stretches

Femur Fracture Exercises

Greater Trochanteric Pain Syndrome Exercises

Hip Replacement Exercises

Knee Replacement Exercises

Lumbar Stenosis Exercises

Lumbar Surgery Exercises

Mastectomy Exercises

Osteoporosis Extension Exercises

Parkinson's Disease Exercises

Piriformis Syndrome Exercises

Plantar Fasciitis Exercises

Pulmonary Exercises

Tibial Plateau Fracture Exercises

Exercise Guidelines

Exercise Tips for Amyotrophic Lateral Sclerosis

Exercise Tips for Ankylosing Spondylitis

Exercise Tips for Arthritis

Exercise Tips for Diabetes

Exercise Tips for Guillain-Barré Syndrome

Exercise Tips for Multiple Sclerosis

Exercise Tips for Myasthenia Gravis

Exercise Tips for Orthopedic Conditions

Exercise Tips for Post-Poliomyelitis Syndrome

Therapeutic Exercise Handouts - Section 4

Exercise Guidelines

Exercise Tips for Renal Conditions

Lower Extremity Exercises

Ankle and Foot Active Range of Motion

Ankle and Foot Isometric Exercises

Ankle and Foot Strength Exercises

Ankle and Foot Stretches

Calf Stretches

Hip and Knee Exercises - Lying

Hip and Knee Exercises - Seated

Hip and Knee Exercises - Standing

Hip Stretches

Stretch Band Exercises - Legs

Thigh Stretches

Neck Exercises

Neck Active Range of Motion

Neck Isometric Exercises

Neck Strength Exercises

Neck Stretches

Other Exercises

Arm Cycle

Cool-Down Stretches

Exercise Log

General Exercise Tips

Passive Range of Motion

Passive Range of Motion - Left Side Weakness

Passive Range of Motion - Right Side Weakness

Pelvic Floor (Kegel) Exercise

Physical Activity Plan

Total Body Exercise Program

Walking Guidelines

Warm-Up Exercises

Pre-Gait Exercises

Pre-Gait Exercise Tips

Pre-Gait Arm Strength Exercises

Pre-Gait Hip and Knee Strength Exercises

Pre-Gait Mat/Bed Exercises

Pre-Gait Standing Exercises

Upper Extremity Exercises

Arm Strength Exercises

Dowel Exercises - Supine

Dowel Exercises - Upright

Therapeutic Exercise Handouts - Section 4

Upper Extremity Exercises

Elbow, Forearm and Wrist Active Range of Motion

Elbow, Forearm and Wrist Strength Exercises

Elbow, Forearm and Wrist Stretches

Elbow, Wrist and Hand Active Exercises

Finger and Thumb Strength Exercises - Left

Finger and Thumb Strength Exercises - Right

Finger and Thumb Stretches and Active Range of Motion - Left

Finger and Thumb Stretches and Active Range of Motion - Right

Flexor Tendon Glides

Forearm and Wrist Active Range of Motion

Forearm and Wrist Strength Exercises

Forearm and Wrist Stretches

Median Nerve Glides

Nerve Flossing - Median

Nerve Flossing - Radial

Nerve Flossing - Ulnar

Pendulum Exercises - Left

Pendulum Exercises - Right

Posture Exercises

Putty Exercises

Scapular Mobility and Strength Exercises - Left Side Weakness

Scapular Mobility and Strength Exercises - Right Side Weakness

Shoulder Active Range of Motion

Shoulder and Hand Active Exercises

Shoulder and Rotator Cuff Active Exercises - Left

Shoulder and Rotator Cuff Active Exercises - Right

Shoulder and Rotator Cuff Exercises Free Weight - Left

Shoulder and Rotator Cuff Exercises Free Weight - Right

Shoulder and Rotator Cuff Exercises Stretch Band - Left

Shoulder and Rotator Cuff Exercises Stretch Band - Right

Shoulder Blade Exercises

Shoulder, Elbow, and Hand Active Exercises

Shoulder Isometric Left - Seated

Shoulder Isometric Left - Standing

Shoulder Isometric Right - Seated

Shoulder Isometric Right - Standing

Shoulder Passive and Active-Assisted Range of Motion - Left

Shoulder Passive and Active-Assisted Range of Motion - Right

Shoulder Pulley Exercises

Shoulder Stretches

Stretch Band Exercises - Arms

Physical Therapy TOOLKIT Balance

Impairments and Functional Limitations:

Muscle weakness (specifically quadriceps, ankle dorsiflexors, ankle plantar flexors)

Limited range of motion in the lower extremities

Slowed reaction time

Reduced processing of sensory information (proprioceptive/somatosensory, visual and vestibular)

Disequilibrium

Cognitive impairment

Assessments and Rating Scales:

Berg Balance Scale (Berg 1995)

Gait Speed Test (Guralnik et al., 1994)

Modified Clinical Test of Sensory Integration on Balance (Shumway-Cook 1986)

Multi-Directional Reach Test (Newton et al., 1997)

Sitting Balance Scale (Medley, Thompson et al., 2011)

Tinetti Balance and Gait Evaluation (Tinetti 1986)

Trunk Impairment Scale (Verheyden et al., 2004)

Physical Therapy Intervention:

Provide a multi-component balance training program.

- Ensure patient safety during training to prevent falls and injuries.
- Incorporate balance exercises into everyday activities.
- Incorporate balance exercises during regular strength training, stretching, and endurance routines.
- Perform balance training first (when combined with resistance and flexibility activities). Recommend 10-15 minutes, three days a week.

Provide progressive challenges to balance.

- Static balance control in sitting, half kneeling, tall kneeling, standing, tandem standing, single leg standing, lunging and squatting
- Dynamic balance control while on a moving surface (therapy ball, wobble board, mini trampoline)
- Challenge postural reactions
 - Ankle strategy
 - o Hip strategy
 - Stepping strategy
 - Weight shift strategy
 - Suspension strategy

Physical Therapy TOOLKIT Balance

Physical Therapy Intervention:

Progress balance activities and exercises by challenging the visual system (low lighting, wear sunglasses indoors, eyes closed), the proprioceptive/somatosensory system (unstable surfaces such as foam pads, therapy ball, mini trampoline, balance disc, wobble board, Biomechanical Ankle Platform System (BAPS), Bosu ball trainer, ambulation on an uneven surface), and the vestibular systems (gaze stability exercises).

Provide dual-tasking balance challenges by combining a balance exercise with another form of physical activity (ball kick, ball toss, arm or leg exercises), a cognitive task (count backward from 100 by 3's, recite the alphabet backwards or name the presidents) or by adding external distractions (noise, people, music).

Utilize interactive video games (Wii-Fit, Wii Sport, and Kinect) and brain fitness programs (Mindfit) to challenge balance.

Patient and Caregiver Handouts:

Balance Exercise Guidelines

Balance Exercises - Sitting

Balance Exercises - Standing

Core Exercise Guidelines

Core Exercises - Back Muscles

Core Exercises - Pelvic Muscles

Core Exercises - Stomach Muscles

Exercise Ball Guidelines

Exercise Ball - Back Muscles

Exercise Ball - Pelvic Muscles

Exercise Ball - Stomach Muscles

Additional Treatment Guides:

Dizziness

Therapeutic Exercise

Chronic Obstructive Pulmonary Disease

Conditions include emphysema, chronic bronchitis, asthma and bronchiectasis

Impairments and Functional Limitations:

Impaired transfers and bed mobility

Impaired gait

Limited range of motion (chest and shoulders)

Muscle weakness

Impaired aerobic capacity/endurance

Impaired balance

Dyspnea at rest or with exertion

Difficulty controlling airway secretions

Memory impairment

Co-occurring conditions - stress incontinence, cubital tunnel syndrome, depression and anxiety, heart disease, hypertension, lung cancer.

Stages of COPD:

Mild - FEV1 is equal or greater than 80 percent. Moderate - FEV1 is between 50 and 79 percent. Severe - FEV1 is between 30 to 49 percent. Very Severe - FEV1 is less than 30 percent.

Physical Therapy Intervention:

Train in safe and efficient functional mobility (sit to stand, bed mobility skills, transfers, wheelchair mobility, ambulation and stairs).

- Treat underlying impairments that limit safety and independence.
- Train in the safe and correct use of assistive devices and adaptive equipment (walkers, canes, sliding boards, bed transfer handles, leg lifters, wheelchairs) as appropriate.

Teach patient and caregiver safe use of oxygen during mobility including fire safety, managing O2 lines, care and use of oxygen equipment, carrying portable O2.

Provide an individualized exercise and walking program that includes endurance, strengthening and flexibility activities that incorporate breathing techniques.

Assess and monitor blood pressure, heart rate, respiratory rate and oxygen saturations and perceived rate of exertion in response to functional activities and exercise.

Instruct in energy conservation, pursed lip breathing, heart rate and dyspnea self-monitoring with application to functional tasks.

Instruct in respiratory panic identification causes and alleviation techniques.

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Chronic Obstructive Pulmonary Disease

Physical Therapy Intervention:

Provide respiratory management.

- Secretion removal (percussion, vibration, and postural drainage).
- Inspiratory muscle training (pursed lip breathing exercises, and inspiratory muscle trainers).
- Cough training.

Reinforce education to reduce exacerbations (cover face with mask, avoid close contact with people who have a cold or flu, through and frequent hand washing, take medications, know the early symptoms).

Educate patient and caregivers about COPD, community resources. Encourage participation in support groups. Refer to outpatient Pulmonary Rehab as appropriate.

Provide education regarding fall risk and prevention strategies. Evaluate home environment, provide environmental modifications and adaptations as appropriate.

Patient and Caregiver Handouts:

Breathing Distress - Causes and Tips to Prevent
Breathing Distress Control
Cool-Down Stretches
Controlled Cough
Edema (Swelling) Control of the Leg(s)
How to Check Your Heart Rate
Posture Exercises
Postural Drainage - Chest Percussion
Postural Drainage Positions
Pulmonary Exercises
Pursed Lip Breathing
Tips to Conserve Energy
Walking Guidelines
Warm-Up Exercises

Additional Treatment Guides:

Fall Risk Assessment and Prevention Urinary Incontinence

Fracture of the Ankle (Lateral, Medial, Posterior Malleolus)

Impairments and Functional Limitations:

Impaired transfers and bed mobility
Impaired gait
Muscle weakness
Limited ankle ROM
Impaired balance/proprioception
Pain and edema
Weight bearing restrictions

Physical Therapy Intervention:

Train in safe and efficient functional mobility (sit to stand, bed mobility skills, transfers, and wheelchair mobility) while adhering to weight bearing restrictions.

- Treat underlying impairments that limit safety and independence.
- Train in the safe and correct use of assistive devices and adaptive equipment (walkers, canes, sliding boards, bed transfer handles, leg lifters, wheelchairs) as appropriate.

Gait training with assistive device and/or ankle cast/boot as appropriate.

- Progress weight bearing. Follow the referring surgeon's specific guidelines for progression.
- Monitor cardiac status during ambulation. The amount of energy required to perform limited weight bearing is 30 to 50% greater than that required for normal ambulation.

Pain and edema control

- Moist heat, warm whirlpool, and/or pulsed ultrasound
- Ice, TENS, compression, and elevation
- Cold for 20 minutes after exercises

Provide exercises for all uninvolved joints to prevent loss of ROM and strength.

Provide a progressive ankle exercise program that includes endurance, strengthening and stretching activities. Progression depends on co-morbidities, type of injury, stage of healing, surgical intervention, and complications. *Follow the referring surgeon's specific guidelines for progression.*

Provide a fall prevention program that includes balance, coordination and agility training and education about fall risk and prevention strategies.

Fracture of the Ankle (Lateral, Medial, Posterior Malleolus)

Patient and Caregiver Handouts:

Ankle and Foot Active Range of Motion Ankle and Foot Isometric Exercises Ankle and Foot Strength Exercises Ankle and Foot Stretches Arm Strength Exercises Edema (Swelling) Control of the Leg(s) Exercise Tips for Orthopedic Conditions Superficial Cold Superficial Heat

Ankle and Foot Active Range of Motion

Do the checked exercises times per day, days a week.		days a week.	
	Pull Foot Back Sit in a chair. Pull your foot knee. Do sets of Repeat with your other foot		
	Point Foot Sit in a chair. Point your too Do sets of Repeat with your other foot		
	Turn Foot In Sit in a chair. Point your too your foot inward. Do sets of Repeat with your other foot		
	Turn Foot Out Sit in a chair. Point your too your foot outward. Do sets of Repeat with your other foot		

Ankle and Foot Active Range of Motion

Do the checked exercises times per day,		, days a week.
	Ankle Circles Sit in a chair. Make circles with your foot. Move one way and then the other. Do sets of Repeat with your other foot.	
	Toe Curls Sit in a chair. Keep your ankle in neutral. Curl your toes down. Do sets of Repeat with your other foot.	
	Pull Toes Back Sit in a chair. Keep your ankle in neutral. Pull your toes back. Do sets of Repeat with your other foot.	
	ABC's Sit in a chair. Point your toes. Trace the letters of the ABC's in the air. Do sets of Repeat with your other foot.	G

Physical Therapy TOOLKIT Edema (Swelling) Control of the Leg(s)

Keep your leg(s) up, as much as you can. Support your leg(s) with a pillow up your calf.	
Apply a cold pack to your hip-knee-ankle-foot (circle). It should not be colder than $59^{\circ}F$ ($15^{\circ}C$).	
Apply cold pack for minutes, times a day.	
Lightly massage your foot and leg with lotion. Start at your foot and move up toward your hip.	
Massage for minutes, times a day.	
Wear a compression stocking.	
Wear the stocking	
Apply elastic therapeutic tape to	
Pump your ankles times a day.	

Postural Drainage Positions

Use postures alone or with chest percussion. Do not do postural drainage soon after a meal.

Lie on your back with your knees bent, Put 2-3 pillows under your hips. Your chest should be lower than your hips. Breathe using deep (diaphragmatic) breathing.

Stay in this posture for _____ minutes.



Lie on your side. Put 2-3 pillows under your hips. Your chest should be lower than your hips. Use a small pillow under your head. Breathe using deep (diaphragmatic) breathing.

Stay in this posture for _____ minutes.

Switch to your other side.



Lie on your stomach. Place 2-3 pillows under your hips. Your chest should be lower than your hips. Use a small pillow under your head. Breathe using deep (diaphragmatic) breathing.

Stay in this posture for _____ minutes.



Up Steps With a Rail Using a Cane

Do not rush. Make sure you have your balance before using the stairs.

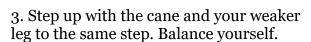




1. Hold on to the rail. Hold the cane in you other hand. This may be your weaker side or your stronger side.

2. Step up with your stronger leg to the first step.







4. Repeat: stronger leg, weaker leg with cane, one step at a time.

Up with the "good" and down with the "bad". This is an easy way to recall which leg to use first.

Ejercicios Activos de Tobillo y Pie

Realice los ejercicios veces al día, veces a la semana.		
	Flexión del Dorso del Pie Tire de los dedos del pie hacia la nariz. Mantenga la rodilla estirada. Mantenga la posición durante el recuento de Complete serie(s) de	
	Flexión de la Panta de Pie Punto los dedos del pie. Mantenga la rodilla estirada. Mantenga la posición durante el recuento de Complete serie(s) de	
	Inversión del Pie Mueva sólo el tobillo. Mantener los dedos señalados. Convertir el pie hacia adentro, para que la suela se enfrenta a la otra pierna. Mantenga la posición durante el recuento de Complete serie(s) de	
	Eversión del Pie Mueva sólo el tobillo. Mantener los dedos señalados. Gire el pie hacia fuera, lejos de la otra pierna. Mantenga la posición durante el recuento de Complete serie(s) de	

Ejercicios Activos de Tobillo y Pie

Rea	alice los ejercicios veces al día,	veces a la semana.
	Círculos por el Tobillo Haga el movimento de un círculo con el pie. Ir agujas del reloj y repita las agujas del reloj. Complete serie(s) de	
	Flexión del Dedo del Pie Mantenga el tobillo en posición neutra. Doblar sus dedos de los pies hacia abajo. Complete serie(s) de	
	Extensión del Dedo del Pie Mantenga el tobillo en posición neutra. Tire los dedos hacia usted. Complete serie(s) de	
	Alfabeto Con los dedos del pie señale las letras del alfabeto en el aire. Complete serie(s) de	G

Physical Therapy TOOLKIT Controlar el Edema de la Pierna(s)

Mantenga la pierna (s) elevado por encima del nivel del corazón tanto como sea posible cuando se está sentado en una silla o un sofá y al acostarse. Apoye a la pierna (s) con una almohada debajo de la pantorrilla, pero no bajo el talón o la rodilla.
Aplique una compresa fría en su cadera / rodilla / tobillo / pie (elija uno). La temperatura no debe ser más fría que 59° F (15° C).
Aplique una compresa fría por minutos, veces al día.
Masajee de la pierna con una loción. Progrese desde el pie hasta la rodilla a la cadera.
Dé masaje por minutos, veces al día.
Use sus medias TED o medias de compresión.
Use las medias de
Bombee de sus tobillos veces al día.

Posiciones para Drenaje Postural

Acuéstese boca arriba con las rodillas dobladas. Ponga 2-3 almohadas debajo de sus caderas. Asegúrese de que su pecho es más baja que las caderas. Mantenga los brazos a los lados. Respira profundamente con la respiración diafragmática.

Permanezca en esta posición durante unos minutos _____.



Acuéstese sobre su lado. Ponga 2-3 almohadas debajo de sus caderas. Asegúrese de que su pecho es más baja que las caderas. Use una pequeña almohada bajo la cabeza. Descanse los brazos donde se sientan cómodos. Respira profundamente con la respiración diafragmática.

Permanezca en esta posición durante unos minutos _____.

Rote en el otro lado.



Acuéstese sobre su lado. Ponga 2-3 almohadas debajo de sus caderas. Asegúrese de que su pecho es más baja que las caderas. Use una pequeña almohada bajo la cabeza. Coloque sus brazos por su cabeza. Respira profundamente con la respiración diafragmática.

Permanezca en esta posición durante unos minutos _____.



Uso del Bastón – Subir Escalones



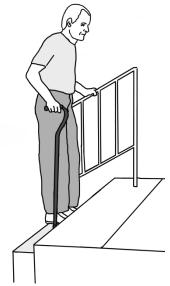
1. Mantenga su bastón en el lado opuesto de la barandilla, esta puede ser su lado más débil y/o afectado o su lado fuerte.



2. Aférrese a la barandilla con la mano libre. Levante la pierna más fuerte hasta el primer escalón.



3. Lleve la pierna más débil/afectada y/o bastón simultáneamente hasta el mismo escalón.



4. Mantenga su pierna más débil y/o afectada y el bastón paralelos entre sí.

Recuerde: "hacia arriba con la buena" y 'hacia abajo con la mala'.