



# **Manipulation Under Anesthesia**

### **INDICATED PROCEDURES**

- Shoulder MUA
- Knee MUA
- Arthroscopic Capsular Release
- Lysis of Adhesions

### **Range of Motion**

- Initiated on day of surgery, either in Recovery Room or at choice of Outpatient Physical Therapy location, depending on time of surgery.
  - OT/PT treatment 1 time on POD #0
  - OT/PT daily for 2 weeks then 2-3 times a week for 6 weeks. Unless determined by surgical staff.
  - o A/AA/PROM to tolerance in ALL planes
  - AROM may not be possible initially due to motor block from interscalene catheter.
  - If motor blocked, perform PROM only to operated extremity. Family
    members may be trained on PROM if present to assist in evening of POD
    #0
  - o Initiate use of dowel and other A/AAROM exercises on POD #0 if patient has sufficiently awakened from anesthesia and there is sufficient resolution of motor block.
  - o Begin use of pulleys for AAROM starting POD #1 if patient can tolerate.
  - O Patient is educated to perform ROM exercises 3 5x daily and utilize the extremity as much as possible with functional tasks.

#### **Activities of Daily Living**

- No showering until incisions are healed; instructions to be provided by medical staff.
- Utilize operated extremity as much as possible with ADLs, avoiding heavy lifting.



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## Follow-up Care

- Patient will schedule a follow-up appointment with Provider.
- Weight bearing as tolerated immediately after procedure- no restrictions.
- Patient may go home with interscalene catheter for pain management to maximize ROM; to be determined by surgical staff in conjunction with pain management.
- OP therapy services to start day of discharge or day after discharge, usually prearranged.