



Rehabilitative Care Alliance

Rehabilitative Care Best Practice Framework for Patients with Primary Total Knee & Hip Replacement

Quick Reference Guide: Ambulatory Rehabilitative Care

JANUARY 2018

The Rehabilitative Care Alliance (RCA) released two best practice frameworks in 2017:

- *Rehabilitative Care Best Practices Framework for Patients with Hip Fractures*
- *Rehabilitative Care Best Practices Framework for Patients with Primary Hip and Knee Replacements*

While the QBP clinical handbooks for hip fracture and primary hip/knee replacements provide high-level recommendations for post-surgical rehabilitative care, the RCA frameworks provide detailed best practices for rehabilitative care, across the care continuum. These best practices ensure high quality care and improve outcomes for patients. The frameworks will also support standardized, evidence-based rehabilitative care across the province.

The frameworks were developed by provincial RCA task and advisory groups following an extensive review of the literature and existing care pathways and practices. The best practice recommendations were reviewed and supported by clinicians, rehabilitative care programs, professional associations and patient and family representatives.

The Frameworks are large comprehensive documents which describe detailed clinical best practices for different levels of rehabilitative care, including:

Hip Fracture:

- Bedded Rehabilitative Care
- Ambulatory Rehabilitative Care
- In-Home Rehabilitative Care
- Rehabilitative Care in Long Term Care

Primary Hip & Knee Replacement:

- Pre-operative Care
- Bedded Rehabilitative Care
- Ambulatory Rehabilitative Care
- In-Home Rehabilitative Care

The following Quick Reference Guide provides a concise overview of the types of recommendations included in the framework, for this level/location of rehabilitative care. Red notations indicate where detailed information on a particular recommendation or topic can be located in the comprehensive framework.

Ambulatory Rehab Care for Patients with Primary Hip & Knee Replacement

Initiation	<p>TKA (Total Knee Arthroplasty): Rehab should begin within 7 days of discharge from acute care.</p> <p>THA (Total Hip Arthroplasty): The rehab session should occur approximately 2-6 weeks post discharge.</p>
Duration	<p>TKA: Rehab should include intensive exercise to achieve range of motion and function throughout the first 12 weeks post-surgery.</p> <p>THA: 1-2 sessions will be suitable for 75-80% of THA patients, 20-25% of patients may require up to 8 sessions.</p>
Frequency	<p>TKA: Treatments should be offered 2-3 times per week.</p> <p>THA: Frequency depends on achievement of goals; typically, once per week.</p>
Summary of Rehabilitative Care Best Practices	<p>The majority of a patient's recovery will take place in the community; therefore, the patient & family require instructions and ongoing education regarding exercise and functional activities to be completed at home. <i>*17-18</i></p>
	<p>In regard to function, range of motion, and health-related quality of life, individualized group-based therapy models provide similar outcomes to 1:1 therapy.</p>
	<p>Rehab should include exercises for ROM and strength, including home exercises; functional training and progressive resistance training. <i>*18-19</i></p> <p>Include principles of healthy lifestyles and active living in the rehabilitation program.</p>
	<p>Interventions to reduce knee swelling may help improve quadriceps strength and gait speed.</p>
	<p>Range of motion, strength, and gait speed should be assessed, to measure progress, along with at least one patient reported, and at least one performance-based outcome measure. <i>*19</i></p>

** Refer to page #(s) indicated, in the RCA Total Joint Replacement Framework, for more information*