**Estimation of Physiotherapy Intervention Requirement Post Elective Orthopaedic Surgery**

**Hip surgery**

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| **Procedure** | **Demand on physio** | **Risk for face to face for average cohort** | **Likely ease of remote management** |
| Total Hip replacement | Minimal demand (only after 6/52 if probs) | Moderate-high | Possible |
| Hip block | minimal | Low-moderate | Possible |
| Arthroscopy and exc. Fem cam | Moderate | Low | Probable |
| Revision THR | Mild | High | Very difficult |

**Knee Surgery**

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| --- | --- | --- | --- |
| **Procedure** | **Demand on physio** | **Risk for face to face for average cohort** | **Likely ease of remote management** |
| Total Knee replacement | High | Moderate-High | Difficult |
| Revision TKR | High | Moderate - high | Difficult |
| Secondary patella resurfacing | moderate | Moderate-high | Difficult |
| Knee arthroscopy | low | Low | Moderate |
| ACLR | Moderate | Low | Moderate |
| Micro fracture | Moderate | Low | Moderate |
| Meniscal repair | low | Low | Moderate |
| MPFL / Tib-tub distalisation | high | Low | Difficult |
| UTO/DFO | Moderate | Moderate - High | Moderate |

**Upper Limb**

**Shoulders**

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| --- | --- | --- | --- |
| **Procedure** | **Demand on physio** | **Risk for face to face for average cohort** | **Likely ease of remote management** |
| Total/hemiarthroplasty and reverse geometry shoulder replacement | Moderate | High-risk | Difficult |
| ASD +/- lateral end of clavicle excision  | Moderate | Low | Easy |
| Arthroscopic RC repair | Moderate | Low | Easy |
| Shoulder arthroscopy | Low | Low | Easy |
| ACJ repairStabalisations/repairs | Moderate | Low | Easy |
| MUA | Moderate | Low | Easy |

**Hand**

|  |  |  |  |
| --- | --- | --- | --- |
| **Procedure** | **Demand on physio** | **Risk for face to face for average cohort** | **Likely ease of remote management** |
| Fasciectomies | High | High | Difficult |
| MUA’s | High | High | Difficult |
| Tendon repairs | High | High | Difficult |
| Replacements | High | High | Difficult |
| Fusions | High | High | Difficult |
| Trapeziectomy | Moderate | Moderate | Difficult |
| Trigger release | Low | Moderate | Moderate |
| CTD | High | Moderate | Easy |
| De-Quervain's | Moderate | Moderate | Easy |

**Elbow**

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| --- | --- | --- | --- |
| **Procedure** | **Demand on physio** | **Risk for face to face for average cohort** | **Likely ease of remote management** |
| Replacement | Low | Moderate-High | Moderate |
| Excision radial head | Low | Moderate - high | Moderate |
| Ulnar nerve release | Moderate | Moderate-high | Easy |
| ORIF/Arthroscopy/removal of metal work | Low | Low | Easy |
| Bone marrow injections | Moderate | Low | Easy |

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| **Region** | **Demand On OPD Physio Service If Surgery Offered** | **Risk if no Face To Face Available** | **Ease of Remote Management** |
| **Ankle** | *Nil – Mild – Mod -* **Severe** |  |  |
| Ankle replacement/revision | Mild | Delay progression mobility/confidence/stiffness | Achievable depend on D/C mob status & ward PT input |
| Ankle Fusion/revision | Mod  | Severe Delay progress to FWB from NWB | Difficult |
| Ankle Arthroscopy debride/micro fracture | Mild | Delay progress mobility/confidence/stiffness | Achievable depend on D/C mob status & ward PT input |
| Ankle Injection OA | Nil | Nil expected | Achievable depend on D/C mob status &ward PT input |
| Removal of metal work | Likely Nil | Delay progress mobility/confidence/stiffness | Achievable depend on D/C mob status & ward PT input |
| **Midfoot joint/Soft Tissue Correction** |  |  |  |
| Midfoot fusion/revision (ST – Triple (ST/TN/CC) – TN – MID –TMT) | Mod | Severe Delay progress to FWB from NWB | Difficult |
| Removal of metal work | Likely Nil | Delay progress mobility/confidence/stiffness  | Achievable depend on D/C mob status & ward PT input |
| Excision/Fusion of Coalition | Mod | Severe Delay progress to FWB from NWB | Difficult |
| Equinus/plano valgus PTTD (FDL/Tib Ant)/Cavus foot correction – bone and soft tissue | Mod | Severe Delay progress to FWB from NWB | Difficult |

**Foot and Ankle Procedures**

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| **Region** | **Demand On OPD Physio Service If Surgery Offered** | **Risk if no Face To Face Available** | **Ease of Remote Management** |
| **Forefoot Joint/Soft Tissue Correction** | *Nil – Mild – Mod - Severe* |  |  |
| 1st MTP – Scarf/Akin – revision/Chevron Osteotomy/Lapidus | Mild | Delay progression mobility/confidence/stiffness | Achievable depend on D/C mob status & ward PT input |
| 1st MTP Fusion/rev | Mod | Severe Delay progress to FWB from NWB | Difficult |
| 1st MTP – Cheilectomy/MUA-CSI/Sesamoidectomy | Mild | Delay progression mobility/confidence/stiffness | Achievable depend on D/C mob status & ward PT input |
| Lesser toe correction – K-wire/fusion/soft tissue flexor tenotomy/Excision Arthroplasty/Weils Osteotomy | Mild | Delay progression mobility/confidence/stiffness | Achievable depend on D/C mob status & ward PT input |
| **Ligament/Tendon/Soft Tissue** |  |  |  |
| TA debridement and recon/FHL transfer-Speed Bridge/excision Hagland deformity | Mod | Severe Delay progress to FWB from NWB | Difficult |
| Spring ligament augmentation/repair | Mod | Severe Delay progress to FWB from NWB | Difficult |
| Ligament Recon – Modified Brostrum / Syndesmosis Stabilisation | Mod | Severe Delay progress to FWB from NWB | Difficult |
| Neuroma/Ganglion/Osteophyte Excision/Bunionectomy/Bunionette/Accessory Bones/Tumour/Corns | Mild | Delay progression mobility/confidence/stiffness | Achievable depend on D/C mob status & ward PT input |
| Plantar Fascia - release | Mild | Delay progression mobility/confidence/stiffness | Achievable depend on D/C mob status & ward PT input |
| Plantar Fibroma Excision | Likely Nil | Delay progress mobility/confidence/stiffness | Achievable depend on D/C mob status &ward PT input |
| Tight tissue/stiff joints/weak muscles/poor balance/proprioception/gait/mob progression | Mod | Delay progress mobility/confidence/stiffness | Achievable depend on D/C mob status & ward PT input |