Harborview Rehabilitation Partners
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Clinic 555-0520 · Therapy line 555-0522 · After-hours triage 555-0525
Physical therapy · Occupational therapy · Patient education

REHABILITATION SPECIMEN

Document
Phase 1 knee home program
Episode
HRP-KN-270705-19
Version
6.0 · Effective 07/2027
Therapist
Maya Chen, PT, DPT (fictional)

Knee Rehabilitation: First 14 Days at Home

Exercise order, walking plan, symptom rules, and progression gate

FICTIONAL SPECIMEN — USE ONLY AFTER YOUR OWN THERAPIST HAS TAUGHT AND CLEARED EACH ITEM

This plan belongs to a synthetic case. A real patient's operation, weight-bearing status, precautions, and progression may be different.

PATIENT	PROCEDURE	PROGRAM DATES	WEIGHT BEARING
Noah Grant (fictional)	**Right total knee replacement · 07/03/27**	**July 5–18, 2027**	**As tolerated with rolling walker**
VISITS	HOME SUPPORT	NEXT SURGEON VISIT	THERAPY LINE
07/05, 07/08, 07/12, 07/15	**Casey Grant (fictional)**	**July 19, 2027**	**555-0522**

BEFORE EACH SESSION

- ☐ Use the rolling walker for every standing activity. Do not practice without it.
- ☐ Choose a firm bed or chair and clear the floor of rugs, cords, and pets.
- ☐ Wear secure, closed-back shoes for standing and walking.
- ☐ Check pain, swelling, wound drainage, dizziness, and how the leg feels compared with the prior session.
- ☐ Keep the phone and written plan within reach.
- ☐ Complete exercises in the order printed; quality and symptom response matter more than quantity.

EXERCISE SEQUENCE — MORNING AND LATE AFTERNOON

ORDER	EXERCISE / STARTING POSITION	ACTION	DOSE ON THIS PLAN	QUALITY CHECKPOINT	STOP / MODIFY
1	Ankle pumps · lying or reclined	Move both ankles slowly up and down	20 repetitions	Full comfortable motion; no bouncing	Stop for new calf pain
2	Quadriceps set · lying, leg straight	Tighten thigh and gently press knee toward bed	10 reps · hold 5 seconds	Kneecap draws upward; keep breathing	Reduce effort if sharp pain
3	Heel slide · lying, heel on sheet	Slide heel toward body, then return slowly	10 repetitions	Knee tracks over second toe	Do not force through a hard stop
4	Gluteal set · lying	Squeeze buttock muscles evenly	10 reps · hold 5 seconds	No breath holding	Stop if cramping persists
5	Seated knee bend · firm chair	Slide foot back until a firm stretch, then return	10 reps · hold 5 seconds	Keep foot flat; no twisting	Ease forward for sharp pain
6	Seated knee straightening · firm chair	Straighten operated knee, then lower slowly	8 repetitions	Thigh stays on chair; control descent	Stop if unable to control

Frequency for this synthetic plan: two structured sessions daily, separated by at least four hours. The therapist may change the dose at a visit; the newest signed sheet controls.

WALKING PLAN — ALL WALKS WITH THE ROLLING WALKER

DAYS	PLANNED WALKS	MAXIMUM SINGLE WALK	ROUTE	ADVANCE ONLY IF
1–3 · Jul 5–7	5 short walks/day	3 minutes	Level indoor route	No buckling or dizziness; symptoms settle within 30 minutes
4–7 · Jul 8–11	5 walks/day	5 minutes	Level indoor route	Therapist confirmed safe pattern on 07/08
8–10 · Jul 12–14	4 walks/day	7 minutes	Indoor; porch only with helper	No increase in swelling the following morning
11–14 · Jul 15–18	4 walks/day	10 minutes	Level route selected by therapist	Therapist confirmed gate on 07/15

DAY-BY-DAY RECORD

DATE	EXERCISE SESSIONS	WALK TARGET	PAIN BEFORE / AFTER	SWELLING NEXT MORNING	NOTES / THERAPIST CHANGE
07/05	2	5 × 3 min	4 / 5	Baseline	Evaluation completed
07/06	____	5 × 3 min	____ / ____	Same / more / less	
07/07	____	5 × 3 min	____ / ____	Same / more / less	
07/08	____	5 × 5 min if cleared	____ / ____	Same / more / less	PT visit
07/09	____	5 × 5 min	____ / ____	Same / more / less	
07/10	____	5 × 5 min	____ / ____	Same / more / less	
07/11	____	5 × 5 min	____ / ____	Same / more / less	
07/12	____	4 × 7 min if cleared	____ / ____	Same / more / less	PT visit
07/13	____	4 × 7 min	____ / ____	Same / more / less	
07/14	____	4 × 7 min	____ / ____	Same / more / less	
07/15	____	4 × 10 min if cleared	____ / ____	Same / more / less	PT visit
07/16	____	4 × 10 min	____ / ____	Same / more / less	
07/17	____	4 × 10 min	____ / ____	Same / more / less	
07/18	____	4 × 10 min	____ / ____	Same / more / less	Bring log 07/19

SYMPTOM RESPONSE MATRIX

RESPONSE	WHAT IT LOOKS LIKE	ACTION NOW	NEXT SESSION
GREEN — expected	Mild ache or stretch; small temporary swelling; symptoms return to starting level within 30 minutes	Rest, elevate as personally instructed, record response	Repeat same level; do not add repetitions
YELLOW — modify and call if repeated	Pain rises more than 2 points; limp worsens; swelling persists into next morning; exercise form breaks down	Stop that item; use walker; record	Reduce to prior tolerated level and call 555-0522 if repeated
RED — stop and urgent contact	New calf pain/swelling, wound opens or drains more, fever as defined on discharge sheet, repeated buckling, new numbness, chest pain, or breathing difficulty	Stop. Follow discharge emergency routing.	No further exercise until care team directs

PROGRESSION GATE ON JULY 15

- ☐ All six exercises performed with correct form.
- ☐ Five-minute walk completed without buckling or dizziness.
- ☐ Symptoms return to baseline within 30 minutes.
- ☐ No next-morning increase in swelling for two days.
- ☐ Transfers completed with walker and prescribed assistance.
- ☐ Therapist documents approval before 10-minute walks.

NOT YET PART OF THIS PHASE

- No cane transition unless the therapist clears it.
- No resisted knee exercise, squats, lunges, kneeling, or floor transfers.
- No outdoor uneven route without therapist selection and helper.
- No driving decision from this handout.
- No added repetitions because one day feels unusually good.

Emergency boundary: For chest pain, severe breathing difficulty, fainting, or other emergency symptoms, call 911. For wound, calf, fever, or sudden function concerns, use the surgeon's discharge contact route.