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Surgical Rehabilitation in closed chain Lower Extremity Surgery – From the Ground up

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Surgical Rehabilitation requires the knowledge of closed chain biomechanics in orthopaedic surgery. Adopting Foot Centering Theory of Biomechanics will improve your surgical planning and postop rehab overnight regarding structure and function. Diagnosing the Functional Foot Type (FFT), like blood typing, separates all feet into subgroups for more improved outcomes with fewer complications immediately. Utilizing patented Rearfoot and Forefoot Supinatory and Pronatory End Range of Motion Testing (Rearfoot and Forefoot SERM-PERM Testing) improves case selection while providing an integrative guide to postop rehabilitation goals. The importance of independent rearfoot and forefoot examination with greater focus on the forefoot, the early midstance phase of gait Root Cause of most biomechanical dysfunction, The BioKickstand of the Foot will conclude the algorithm. Tools for postop rehab like Kinesiology Tape ROM Control, Foot Centering Pads and Dynamic Foot Braces along with foot type specific exercise will be included as effective for the rehab team. Comparison to previous theories will illustrate the accuracy and usefulness of this philosophy utilizing a number of surgical cases.

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