



COHESIVE HEALTHCARE MANAGEMENT & CONSULTING

Mangum Regional Medical Center

TITLE		POLICY	
Continuous Passive Motion Unit (CPM)		817	
MANUAL	EFFECTIVE DATE	REVIEW DATE	
Rehabilitation			
DEPARTMENT	REFERENCE		
Rehabilitation Services			

SCOPE: All professional rehabilitation staff who will be utilizing CPM for patient care at Mangum Regional Medical Center.

PURPOSE: To outline procedures for use of Continuous Passive Motion unit (CPM).

DEFINITION: Continuous passive motion (CPM) is a passive therapy in which a machine is used to move a patient’s joint through a specific range of motion.

POLICY: Physician Order:

- Order received for CPM
- Specific Physician protocol that includes use of CPM in specified protocol.

Indications:

- Post-operative extremity joint procedure

Precautions:

- Healing, sutured or stapled surgical incision
- Hemovac

PROCEDURE:

1. Therapist evaluates patient for appropriateness of referral.
2. Explain treatment to patient.
3. Unit is adjusted per manufacturers guidelines.
 - a. Unit access of motion in line with joint axis of motion.
 - b. Unit attached to overhead frame or stabilized.
 - c. Foot of bed level flat and power to the foot of bed control turned off, if applicable.
4. Initial and revision of parameters are determined as follows:
 - a. Per physician order.
 - b. Per position protocol.
 - c. Per therapist if not specified per physician.
 - 4.c.1 therapist determination will be based on the joint’s current passive range of motion measurement and patient tolerance.

- 4.c.2 Total knee replacement parameter recommendations: 0 degrees extension, 40 degrees flexion, slow speed (1-3), applied for minimum 8 out of 24 hours, increasing flexion 10 degrees daily. Note: 8 hours need not be continuous and may be interrupted by meals, sleep, toileting, or therapy sessions.
- 5. Patient instructed in use of patient on/off switch.
- 6. Therapist to notify primary nurse, unit has been applied and reviews and or instructs in the operation of unit.
 - a. Donning/doffing of unit.
 - b. On/off switch.
 - c. Treatment time.
 - d. Foot of bed to remain level/flat and foot control power to be disabled while unit operating.

REVISIONS/UPDATES

Date	Brief Description of Revision/Change