

Orthopaedic Sports Specialists, P.C.

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Rehabilitation Protocol

Hip Arthroscopic Labral Repair or Reconstruction

I. Immediate Post-Operative Phase:

Goals: Normalize gait, maintain hip flexibility

(A) POD 1:

Weight Bearing: Two crutches and WBAT for 4-6 weeks

(in older patients with more osteoporosis this maybe more limited)

Exercises:

- Hip flexibility
 - o Hip flexors
 - o Quads
 - o Piriformis/glutes
- Trunk flexibility
- Hamstring stretch
- Straight leg raises in supine
- Hip ABD, ADD, Extension exercises
- Quad sets, glute sets
- Gait Training

(B) POD 2-4:

Weight Bearing: Two crutches and WBAT

ROM: Hip flex 0° - 90°

Self Directed Circumduction Exercise Program

Lay supine and assistant will elevate leg 10° and abduct 20°

Make circles (both IR and ER) set of 10

Lay supine and assistant will elevate leg 70° and abduct 50°

Make circles (both IR and ER) set of 10

Repeat 3 times a day for the first 6 week following surgery.

Exercises:

- Maintain hip and trunk flexibility
- Straight leg raising (all 4 directions)
- Standing weight shifts and mini squats (0° - 30°)
- Continue quad sets/glute sets

(C) POD 5-7:

Weight Bearing: : Two crutches and WBAT for 2-3 weeks

ROM: 0° - 90°

Exercises:

- Multi-angle isometrics hip flex/ext/ABD/ADD/IR/ER
- Straight leg raise (all 4 directions)
- Standing weight shift and mini squats
- Knee extension 90° - 0°
- Maintain hip and trunk flexibility

II. Maximum Protection Phase (Week 2-6):

Goals:

- Absolute control of external forces
- Nourish articular cartilage
- Decrease fibrosis with increased ROM
- Stimulate collagen healing
- Prevent muscle atrophy
- Prepare ambulation off crutches

(A) Week 2:

Weight Bearing: : Two crutches and WBAT for 2-3 weeks

ROM: 0° > 90°

Begin Aquatic program.

Exercises:

- Multiple-angle isometrics
- Leg raises (4 planes)
- Maintain hip and trunk flexibility
- Standing weight shift and mini squats 0° - 40°
- Proprioception training
- Initiate aquatic exercises for gait training

(B) Week 3-4:

Full Weight Bearing- Wean off Crutches

Exercises:

- Same as week two
- Bicycle for ROM stimulus and light endurance
- Elliptical trainer for gait
- Aquatic rehab.
- Initiate eccentric quads

- Hip flexion ROM > 90° per tolerance
- Progress pool activities

III. Controlled Ambulation Phase (Week 6-9):

Goals:

- Control forces during walking
- Maximal strength for lower extremity

Exercises:

- Same as week 4 – Advance as tolerated
- Initiate swimming program
- Running in aquatic rehab.
- Initiate step-ups (Start with 2” and gradually increase)
- Increase closed kinetic chain rehab
- Increase proprioception training
- Passive ROM hip flex 0° -110°
- Initiate walking program

IV. Light Activity Phase (Month 3-4):

Goals:

- Development of strength, power, and endurance
- Begin to prepare for return to functional activities
- Enhance neuromuscular coordination and endurance

Exercises:

- Continue strengthening exercises
- Initiate plyometric program
- Initiate running program
- Initiate agility drills
- Sport-specific training and drills

Criteria to Initiate Running Program:

- Satisfactory clinical exam
- Adequate quad/hip control/strength
- Pain free plyometric drills

V. Return to Activity Phase (Month 5-6):

Goals:

- Achieve maximal strength and further enhance neuromuscular coordination and endurance

Exercises:

- Continue strengthening program
- Continue closed chain strengthening program
- Continue plyometric program
- Continue running and agility program
- Accelerate sport specific training and drills