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POSTOPERATIVE REHABILITATION PROTOCOL HIP ARTHROSCOPY FOR LABRAL TEAR

Revised June 2018

Weeks 1 to 2: Early Motion Phase

Weight Bearing: Crutches 5 to 7 days, progress to full weight bearing with comfort and stability. *If labral repair performed, FFWB x 3 weeks, progress to full WB incrementally x 6 weeks. **If microfracture performed, FFWB x 8 weeks.

ROM Goals:

Extension: 10 degrees Flexion: 100 degrees Abduction: 30 degrees Adduction: 30 degrees

Internal rotation in flexion: 20 degrees External rotation in flexion: 70 degrees

Therapeutic Exercises:

Strengthening: Quad sets

Conditioning: Stationary bike 5 to 10 minutes

Cryotherapy: 6 to 8 times a day for 20 minutes

Weeks 3 to 4: Advanced Motion Phase

Weight Bearing: Full

ROM Goals:

Extension: 20 degrees Flexion: 120 degrees Abduction: 45 degrees Adduction: 45 degrees

Internal rotation in flexion: 30 degrees External rotation in flexion: 90 degrees

Therapeutic Exercises:

Strengthening:

Quad sets, four-way straight leg raises

Proprioception: Weight shifting

Conditioning: Stationary bike, less than 15 minutes



Weeks 5 to 6: Strengthening Phase

Weight bearing: Full

ROM Goals: Full

Therapeutic Exercises:

Strengthening:

Closed chain: half squats, step downs, etc.

Proprioception: Weight shifting Balance activities

Conditioning: Stationary bike Treadmill

Weeks 7 to 8: Advanced Strengthening Phase

Therapeutic Exercises:

Strengthening: Closed chain Multi plane single leg Hamstrings Hip hikes

Proprioception: Weight shifting Single leg balance activities

Conditioning: Stationary bike Treadmill



Week 9, Month 4: Conditioning Phase

Therapeutic Exercises:

Strengthening:
Closed chain
Multi-plane single leg
Hamstrings
Hip hikes
Multi-hip
Trunk bends
Plyometrics

Proprioception: Weight shifting Balance activities

Conditioning:
Stationary bike
Treadmill
Stair climber
Elliptical machine
Ski machine

Month 5: Return to Sport and Function Phase

Therapeutic Exercises:

Conditioning: Running straight

Note: Return to sport based on provider team input and appropriate testing.

All times and exercises are to serve as guidelines. Actual progress may be faster or slower, depending on each individual patient, as agreed upon by the patient and his/her team providers.