

The Orthopaedic & Fracture Clinic, P.A.
Physical Therapy/Sports Medicine
Hip Abductor Repair

REHABILITATION PROTOCOL

This protocol should be used as a guideline for progression, but may need to be altered depending on extent of surgical procedure, healing restraints or patient tolerance.

- Strict protective weight-bearing status for 8 weeks.
 - Allow to place weight of leg on ground < 30 lbs (neutralizes joint reaction forces).
- Emphasis on range of motion.
 - Active assisted (hip flexion)/passive motion (hip abductor).
 - Avoid stress to repair site by avoiding passive adduction, ER/IR for 4 weeks.
 - No active hip abduction for 8 weeks.
 - Soft tissue mobilization as needed.
 - Emphasis on cycling for range of motion without resistance.
 - At 8 weeks post op transition to full weight bearing.
 - Minimum 3 months before progression of functional activities as tolerated.

Phase I (Week 1)

- Ankle pumps, glut sets, quad sets, hamstring sets, adductor isometrics, heel slides, pelvic tilts, double leg bridges, seated knee extension, prone on elbows, prone knee flexion, standing hip flexion and extension.
- Hip mobilization grade #1.

Phase I (Week 2)

- Continue with previous exercises, but may add:
 - Supine marching (90 degrees), modified dead bug (90 degrees), supine hamstring stretch with strap, supine iliopsoas/rectus femoris stretch involved leg off table, stationary bike without resistance.

Phase I (Week 3)

- Continue with previous exercises, but may add:
 - Active range of motion with gradual end range stretch flex/extension, leg raises flexion and extension.

Progress to Phase II when patient has achieved the following:

- Minimal pain, 90° of pain free flexion, minimal ROM limitations with internal rotation, extension/abduction.

Phase II (Weeks 4-6)

- Continue with previous exercises, but may add:
 - Crunches, double leg bridge on ball, gradually increase resistance with stationary bike, standing adduction with Thera band, quadruped super moon, single leg bridge.

Progress to Phase III when patient has achieved the following:

- 105° flexion, 20° of ER, pain free with Phase II exercises.

Phase III (Week 7)

- Continue with previous exercises, but may add:
 - Logrolling, ball hip lifts, bent knee hip lift, hamstring curls.

Phase III (Week 8) Start to Wean Off Crutches)

- Continue with previous exercises, but may add:
 - Mini squats, leg press, step up, side step over cones, abduction 150 metrics (pain free).

Phase III (Week 9)

- Standing hip abduction, seated EK/IK, clamshells, Elliptical.

Phase III (Week 10)

- Continue with previous exercises, but may add:
 - Sidelying hip abduction without resistance, single leg balance, bosu squats.

Phase IV (Weeks 11-15)

- Lateral step ups, single leg body squats, lunges, Elliptical, standing abduction with Thera Band, step drills, proprioception exercises.