

Covenant Medical Group • Orthopaedics

Orthopaedic Surgery & Sports Medicine • Garrett Kerns, DO

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CLINICAL PROTOCOL FOR HIP ARTHROSCOPY (STAGED PROCEDURES)

PAOs will typically be performed 3-6 weeks following hip arthroscopy.

DO NOT perform the following exercises at any time, unless advised otherwise by a referring physician:

- Straight leg raises
- Front planks (4 months post-op minimum)
- Weighted side-lying abduction
- Squatting below parallel

POD 1 – Until Open Hip Procedure

Precautions:

- Hip flexion as tolerated
- Avoid hip flexion with IR
- No ER stretching for 2 weeks
- Consistent use of night splint for 1 week
- Frequently lay flat with minimal flexion at hip to prevent hip flexion contracture (**prone lying 2-4 hours/day minimum**)
- NSAIDS to be discontinued 7 days prior to open hip surgery

Weight Bearing (WB) Progression:

- **TDWB** immediately post - op
- **At 2 weeks**, progress to 50% WB – after 3-4 days, further progress to 75% WB
- **At 3 weeks**, if criteria is met progress to **FWB within the patient's house only if:** controlled pain, non-antalgic gait pattern, normal pelvofemoral mechanics

Educate patient on importance of using crutches. Patient will NOT discontinue crutch use before second surgery.

The use of one crutch/cane is discouraged in most cases. If necessary, please discuss with referring physician.

NOTE: Aquatic therapy may be initiated at 2 weeks post-op, pending incision healing.

Exercises should be performed 1-2x/day, 6 days per week.

POD 0-7 – Immediately Post-Op:

- Stationary bike (minimal resistance, max 90 degrees hip flexion)
- Passive ROM (supine/standing circumduction, supine IR)
- Ankle pumps
- Quad sets, heel digs, glut sets
- Isometric hip ADD
- Curl-up
- Standing hip ABD
- Standing EXT
- Active prone hamstring curl
- Prone ER isometrics
- Quadruped rocking

Weeks 2-3 – WB Preparation:

- Kneeling hip flexor stretch, prone quad stretch
- LAQ/SAQ (if poor quad recruitment)
- Prone active hip IR and ER
- Prone EXT (knee straight and knee flexed to 90 degrees)
- Bridge (Add ball squeeze, unstable surface, stability ball to increased difficulty – **No SL**)
- Clamshell or side-lying hip ABD (no resistance, low reps, educate on GMed contraction)

Week 3-Surgery – Strengthening and Preparation for Open Hip Surgery:

- Gentle FABER slides/figure 4 stretch
- Bird dog
- Mini squats
- Calf raises
- Clock Steps
- Hamstring bend over
- Leg extension, hamstring curl weight machine

These are general guidelines and may vary depending on your surgery/surgeon.