

Trochanteric Bursectomy/Proximal ITB Release

(w/ or w/o femoroplasty or acetabuloplasty)

Phase I – Post-Op Weeks 1-4

Goals

- Restore ROM within restrictions
- Normalize gait without assistive device and normal pelvofemoral mechanics
- Prevent muscular inhibition/increased strength

Precautions

- Gradual progression to full ROM
- WB – TDWB immediately post-op; progress WBAT
 - **If femoroplasty or acetabuloplasty was performed – TDWB 2 weeks** (progress w/ MD approval)
- Progress WB, as following criteria are met
 - Controlled pain
 - Non-antalgic gait pattern
 - Normal pelvofemoral mechanics – No Trendelenburg

Exercise Program

- Heel slides
- Passive ROM ER, IR, Abd
- Supine Knee to Chest
- Standing or S/L hip ABD/ADD
- Prone Extension
- Bridge
- Quadruped rocking
- 4-way hip, standing on uninvolved LE
- Curl-up
- Stationary bike

Progress exercises as muscular control at proximal hip and WB status allows

- SLB
- Calf raises
- Mini squats
- Weight- shifting/Clock Steps
- Lateral Stepping – glut medius control
- Involved and uninvolved anterior/posterior steps with all taps
- 4-way hip, standing on involved LE
- Elliptical (after FWB 1 week w/o c/o)

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

Phase II – Post-op Weeks 4-8

Criteria for progression to Phase II:

- *Minimal pain with phase 1 exercises*
- *Minimal ROM limitations*
- *Normal gait pattern-no Trendelenburg*

Goals

- Restore full functional P ROM
- Progressively increased strength
- Return to ADL's

Exercise Program

- Water walking in chest deep water if incisions are well-healed
- Hip ROM – all planes
- Stretching for Hip Flexors, ER, IR/Piriformis
- Clamshell
- Static and Dynamic Core Control Exercises – Quadruped Bird Dog, Front Plank, SLB with reach
- Step Ups
- Step Downs

Phase III – Post-op Weeks 8-12

Criteria for progression to Phase III:

- *Successful progression through Phase II exercises*
- *Overall hip strength > 70% of the uninvolved side*
- *Pain-free/normally gait pattern*

Goals

- Restoration of muscular strength and endurance
- Restoration of cardiovascular endurance
- Optimize neuromuscular control/balancee/proprioception

Exercises

- Closed changed T-band hip internal and external rotation
- Wall tap for glut medius
- Single leg balance progressing to airex and rebounder
- Unilateral bridge and bridging with swiss ball
- Side plank-knee/toes
- Lateral stepping/hip ER stepping with T-band

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