



## **Post-Operative Rehabilitation Protocol for**

### **Hip Gluteal Tendon Repair**

#### **PHASE 1 (0-2 weeks post-op)**

##### **Goals**

- Protect repair
- Control post-operative pain, inflammation and swelling
- Emphasis on compliance to HEP and WB precautions/restrictions

##### **Brace/Precautions/crutch use**

- Weight bearing:
  - 25% weight bearing with crutches
  - Gait/Crutch training if needed
- Brace as indicated based on severity of tear

##### **Range of Motion**

- Gentle PROM
  - Hip flexion to 90
  - Hip abduction as tolerated
  - Hip extension to neutral
- No passive hip adduction, external rotation, or internal rotation
- No active hip adduction or internal rotation

##### **Strengthening**

- Upright stationary bike with no resistance-push pedal with non-op leg
- Joint mobilization
- Soft mobilization (gentle scar massage and hip flexor massage)
- Hip isometrics in extension and adduction
- Quad sets, hamstring sets
- Lower abdominal activation

##### **Home Instructions**

- Keep surgical dressings clean and dry
- Change surgical bandages on the 2nd day after surgery (keep covered until first clinic visit)
- Avoid getting sutures wet until at least 5 days after surgery ( do not scrub, soak, or submerge the incisions)
- Note DVT (blood clot) prophylaxis medications provided by your surgeons to take following surgery-follow those instructions carefully



## **PHASE II (2-6 weeks post-op)**

### **Goals**

- Control pain and inflammation
- Promote healing
- Continue with physical therapy and range of motion

### **Brace/Precautions/Crutch Use**

- 50% weight bearing with crutches
- Advance weight bearing gradually with goal to wean off crutches at week 6-8
  - Gait training/crutch weening

### **Range of Motion**

- Slowly advance ROM as tolerated
- Active assisted hip adduction/internal rotation
- PROM external/internal rotation and adduction to neutral
- AROM hip flexion

### **Strengthening**

- Continue as above
- Progress to isometric resistance
- Core stabilization

### **Home Instructions**

- Restore normal activities of daily living

### **Suggested Exercises**

- Continue Phase 1 exercises as appropriate
- Quad hamstring isotonic exercises
- Quadruped rocking
- Supine bridges
- Prone hip extension
- Include stretching
  - Manual hip flexor stretching
  - Modified Thomas position

## **PHASE III (after 12 weeks post-op)**

### **Goals**

- Normalize gait, work on symmetry
- Advance ROM
- Continue pain and inflammation control



### **Precautions**

- Weight-bearing as tolerated (wean by week 8 if note yet done)

### **Range of Motion**

- Progress PROM as tolerated
- Start active hip abduction and internal rotation

### **Strengthening**

- Progress lower extremity and core strengthening as tolerated

### **Home Instructions**

- Restore normal activities of daily living
- Progress slow walking on level surfaces

### **Suggested Exercises**

- Continue from phase 2
- Eccentric step downs
- Lateral walks, side stepped- no bands
- Balance and proprioceptive – start bilateral

## **PHASE IV ( after 12 weeks post-op)**

### **Goals**

- Full range of motion
- Work towards normalizing gait
- Return to normal ADLs and prior level of function

### **Precautions**

- Pain with therapeutic exercise & functional activities

### **Range of Motion**

- Progress to full active ROM
- Resisted abduction and internal rotation

### **Strengthening**

- Gradually progress strengthening of hip abductors/adductors
- Continue to advance LE strengthening and flexibility
- Advance core stability and strength

### **Home Instructions**

- Maintain normal activities of daily living
- Normalize gait



### **Suggested Exercises**

- Continue to advance LE strengthening, flexibility with exercises in phase 3
- Focus on gait normalization
- Lunges
- Plyometrics
- Balance and proprioceptive progression to single leg as tolerated
- Advance core stability
- Continue stretching