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WOODSON HIP ARTHROSCOPY WITH LABRAL FIXATION REHAB PROTOCOL

General Info:

This is a list of general guidelines for a hip arthroscopy with labral fixation rehab program. These guidelines may change based on fixation, condition of repaired tissue, variations in surgical procedures, age, and patient's response to treatment. Please call our office if there are any questions.

Precautions:

- NO active external rotation for 4 weeks
- Weight bearing will be determined by the procedure
- Hip flexors tendonitis
- Trochanteric bursitis
- Synovitis
- Manage scarring around the portal sites
- Increase ROM focusing on flexion, careful of external rotation and aggressive extension

Post-Op Weeks 0-2: Phase I

- ROM:
 - NO EXTERNAL ROTATION
 - Introduce stool rotations (AAROM hip IR)
- Weight bearing:
 - Wear hip brace and maintain non-weight bearing status
- Strengthening and Conditioning:
 - Supine hip log rolling for internal rotation
 - Pelvic tilts
 - Hip isometrics NO flexion
 - NMES to quad with SAQ
- Scar massage
- Modalities

Post-Op Weeks 2-4: Phase II

- Weight bearing:
 - Wear hip brace and maintain non-weight bearing status
 - No external rotation > 20°

- Strengthening and Conditioning:
 - Stool rotations for internal rotation
 - Progress core strengthening (avoid hip flexor tendonitis)
- Scar massage

Post-Op Weeks 4-8: Phase III

- Weight bearing:
 - Toe-touch weight bearing beginning weeks 4-6
 - Week 4 wean off assistive device
 - Week 6 discontinue hip brace
- ROM:
 - Bent knee fall outs (week 4)
 - Stool rotations for external rotation
- Strengthening and Conditioning:
 - Progress with hip strengthening-isotonics all directions except flexion
 - Glute/piriformis stretch
 - Bike for 20 minutes per day (can be 2x/day)
 - Supine bridges
 - Quad rocking for hip flexion
 - Sustained stretching for PSOAS with cryotherapy (2 pillows under hips)
 - Step downs
 - Clam shells
 - Begin proprioception/balance training (balance boards, single leg stance)
 - Bilateral cable column rotations (week 4)
 - Treadmill side stepping progress from level to inclines (begin week 8)
 - Aquatic therapy in shallow end of pool (no treading water)

Post-Op Weeks 8-12: Phase IV

- ROM:
 - Standing BAPS rotations
 - External rotation with FABER
 - Hip joint mobilization with belt
 - Lateral and inferior with rotation
 - Prone posterior-anterior glides with rotation
 - Hip flexor, glute/piriformis and IT band stretching
- Strengthening and Conditioning:
 - Hip hiking (begin week 8)
 - Introduce hip flexion isotonic
 - Multi-hip machine (open and closed chain)

- Leg press (bilateral → unilateral)
- Isokinetics: knee flexion/extension
- Core strengthening (avoid hip flexor tendonitis)
 - Prone/side planks
- Progress with proprioception/balance
 - bilateral → unilateral → foam → dynadisc
- Progress cable column rotations from unilateral → foam
- Side stepping with theraband

Post-Op Weeks 12-16: Phase V

- ROM:
 - Progressive hip ROM
- Strengthening and Conditioning:
 - Progressive lower extremity and core strengthening
 - Endurance activities around the hip
 - Dynamic balance activities

Post-Op Weeks 16+: Phase VI

- Strengthening and Conditioning
 - Progressive lower extremity and core strengthening
 - Plyometrics
 - Treadmill running program
 - Sport specific agility drills