

The rehabilitation guidelines contained in this document have been created and approved by the physicians and rehabilitation staff of Agility Orthopedics. There is an expectation that patients will only be advanced beyond the timelines designated in this document with the written permission of the physician. Also, physicians should be notified immediately if patients are not progressing according to the described timelines.

**Precautions**

- Gait training with crutches/cane on stairs and flat surfaces (WBAT).
- No hip flexion beyond 90 degrees for 12 weeks
- No hip adduction past neutral/midline for 12 weeks
- No hip internal rotation for 12 weeks

**Days 0 to 4**

- Patients are hospitalized for 2-4 days
- Instruct in concept of RICE and Pain Management
- Bed mobility and transfer with minimal assistance.
- Ambulate with assistive device.
- Home Exercise Program 1-2 times per day:
  - ✓ Ankle pumps
  - ✓ Quad sets
  - ✓ Glut sets
  - ✓ Supine Hip Abduction
  - ✓ Heel Slides

**Weeks 1-4**

- Continue use of assistive device
- PROM of hip abduction, hip flexor, quadriceps and hip external rotation if needed.
- Continue exercises described above and add the following:
  - ✓ Short Arc Quads
  - ✓ Long Arc Quads
  - ✓ Balance/Proprioception weight shift
  - ✓ Gait training
  - ✓ Postural cues/re-education during functional activities

**Week 4 - 8**

- Wean off assistive device
- Begin scar massage when incision is healed.
- Improve ROM within precautions
- Progression to driving depending on operative side
- Continue exercises described above and add the following:
  - ✓ Stationary bicycle for strength and endurance not to exceed 90 degrees of hip flexion
  - ✓ SLR series - Straight leg raise
  - ✓ Front and lateral step ups
  - ✓ Sit to Stand exercise to increase hip extension

- not past 90 degrees of hip flexion, hip abduction, hip extension
- ✓ Calf raises
- ✓ Mini squat
- ✓ Bridging

- strength
- ✓ Side stepping
- ✓ Marching
- ✓ Hip external rotation to 30 degrees
- ✓ Terminal knee extension

---

**Weeks 8 - 12**

- Discontinue assistive device
- Return to light recreational activities
- Advanced balance/proprioceptive training
- Increase resistance with above exercises
- Continue exercises described above and add the following:
  - ✓ Ascend and descend stairs in step over step pattern
  - ✓ Provide patients with open/closed chain exercises that are appropriate for individual needs
  - ✓ Initiate endurance program (walking/pool)
  - ✓ Focus on muscle hypertrophy

---

**Weeks 12 - 16**

- Return to recreational sports/activities: golf, tennis, walking, or biking
- Continue exercises described above and add the following:
  - ✓ Return To Work tasks
  - ✓ Carrying, pushing, or pulling
  - ✓ Squatting or crouching