

Phase I: Protection and mobility (0-6 weeks)

Goals:

- *Protect integrity of surgically repaired tissue*
- Reduce pain and inflammation
- Prevent muscle inhibition
- Restore range of motion

Restrictions:

- Weight bearing:
 - Flat foot weight bearing (FFWB) for 6 weeks
 - After 6 weeks, gradually wean out of crutches, Weight Bearing as Tolerated (WBAT)
 - Transition from 2 crutches to 1 crutch or cane to off crutches as long as no Trendelenburg gait or other compensatory gait patterns.
- ROM:
 - No passive hip adduction and external rotation for 6 weeks
 - No active hip abduction and internal rotation for 6 weeks
 - Hip flexion past 90° for 6 weeks
 - No focused gluteal stretching or internal rotation (IR) in hip flexion for 8 weeks
- Therapy:
 - No pool therapy until incisions are healed (3 weeks)
 - No single leg stance for 12 weeks

Treatment:

- Brace set from 0-90° for 12 weeks
 - need to sleep in brace
- Manual therapy as needed
- Avoid incision until week 3
- Quad sets, and core isometrics
- Hip extension and adduction isometrics
- Core strengthening
- Stationary bike, no resistance

Criteria to progress to next phase:

- Minimal pain and inflammation
- Range of motion (ROM) within 85% of nonsurgical
- Cleared to begin Weight bearing progression

Phase II: Early strength (Week 7-12)

Goals:

- Protect integrity of surgically repaired tissue
- Restore full ROM
- Begin strengthening

Restrictions:

- No ballistic or forced stretching
- No impact activities
- No treadmill during gait training
- No single leg stance

Treatment:

- Core stability
- Progress hip ROM, but be mindful of glute stretching
- IR and ER isometrics, abduction isometrics
- Weight shifts
- Gait training without crutches
- Progress strengthening exercises appropriately
- May add resistance to stationary bike

Criteria to progress:

- Full weight bearing without gait assistance or gait abnormalities
- Good strength

Phase III: Advanced strength (Weeks 13-23)

Goals:

- Restore muscle endurance and strength
- Optimize neuromuscular control

Restrictions:

- No ballistic or forced stretching
- No impact activities
- Single leg stance now permitted
- May begin elliptical

Treatments:

- Progressing lower extremity and core strength
- Progress dynamic balance
 - Progressing to single leg strengthening work at around week 16
- Low impact activity for 30 minutes (bike, elliptical)
- Return to run program may begin at 4-5 months
- Water jogging if tolerated

Criteria to progress:

- Full ROM pain-free
- Hip strength >80% of uninvolved
- Able to single leg balance without Trendelenburg

Phase IV: Return to sport (Week 24+)

Goals:

- Continue strengthening and muscle power
- Perform sport specific activity pain-free

Restrictions:

- Higher level activities as tolerated (ex. outdoor biking, golf)

Treatments:

- Single-leg strengthening
- Progressing lower extremity and core strength
- Progress dynamic balance
- Progress to plyometrics
- Sport specific exercises and drills

Criteria to return to sport:

- *Dr. Everhart's clearance*
- Hip strength >90% of uninvolved
- Completion of functional testing, pain free
- Full pain-free ROM