

Phase I: Protection and mobility (0-4 weeks)

Goals:

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

Restrictions:

- Brace set from 0-90° for 3 weeks
- Weight bearing:
 - 20 lbs of flat foot weight bearing (FFWB) for 2 weeks
 - Use bathroom scale to measure force
 - After 2 weeks, gradually increase weight bearing
 - Days 1-2: 25% of body weight
 - Days 3-4: 50% of body weight
 - Days 5-6: 75% of body weight, remove 1 crutch
 - Days 7: 100% of body weight, continue 1 crutch
 - Do not progress if you experience pain or pinching
 - Continue with 1 crutch until gait is normal and pain-free
- ROM:
 - Hip flexion: 90°
 - Hip extension: 0°
 - Hip Abduction: 25°
 - Hip ER with leg extended: 0°
 - May do ER exercises in 70° of hip flexion (takes stress off capsule repair).
 - Hip IR: No limit
 - Avoid impingement position (flexion, adduction and internal rotation)
- Therapy:
 - No pool therapy until incisions are healed (3 weeks)
 - No resistance on bikes, no clipping into bike
 - No open kinetic chain hip flexion exercises

Treatment:

- Manual therapy as needed
- Avoid incision until week 3
- *Passive circumduction (most important to prevent adhesion!)*
- Passive ROM hip internal rotation (IR), external rotation (ER) in 70 degrees flexion to 90, and abduction.
- Quadraped rocking

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- Active abduction, extension, internal and external rotation ROM exercises allowed at 3 weeks, as long as you're within above ROM restrictions.
- Quad sets, glute and core isometrics
- Stationary bike
 - Do not flex hip past 90
 - Do not clip in

Criteria to progress to next phase:

- Minimal pain, pinching and inflammation
- Range of motion (ROM) within 85% of nonsurgical
- Full weight bearing

Phase II: Early strength (Week 5-8)

Goals:

- Protect
- Restore full ROM
- Restore gait
- Begin strengthening

Restrictions:

- No ballistic or forced stretching
- No impact activities
- Limit open kinetic chain hip flexion exercises until week 6
 - May perform heel slides at 5 weeks as a form of active assisted hip flexion
- No loaded hip flexion exercises past 90 degrees until stage 3.

Treatment:

- May add resistance to bike
- Hip strengthening exercises
- Core stability
- Balance progression

Criteria to progress:

- Normal and pain-free gait
- Full ROM
- FABER ROM within 1cm of non-operative side
- Hip adduction, extension, IR and ER strength $\geq 80\%$ uninvolved
- Hip flexion strength $\geq 60\%$ uninvolved

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Phase III: Advanced strength (9-24 weeks)

Goals:

- Restore muscle endurance and strength
- Optimize neuromuscular control

Restrictions:

- No ballistic or forced stretching
- No impact activities

Treatments:

- Progressing lower extremity and core strength
 - First 6 weeks focused strengthening
 - Next 6 weeks focused lower body power
- Progress dynamic balance
- Low impact activity for 30 minutes (bike, elliptical)

Criteria to progress:

- Hip adduction, extension, IR and ER strength $\geq 90\%$ uninvolved
- Hip flexion strength $\geq 80\%$ uninvolved
- Full ROM pain-free

Phase IV: Return to sport (Week 24+)

Goals:

- Continue strengthening
- Perform sport specific activity pain-free

Restrictions:

- No running until 4 months

Treatments:

- Single-leg strengthening
- Progressing lower extremity and core strength
- Progress dynamic balance
- Low impact activity for 30 minutes (bike, elliptical)
- Sport specific exercises and drills

Criteria to return to sport:

- *Dr. Everhart's clearance*



- Completion of functional testing. Either:
 - 90% limb symmetry on Y-Balance test OR
 - 90% limb symmetry on ACL return to sport hop testing protocol
 - Involves the single leg hop for distance, sing leg 6m timed hop, triple hop for distance, crossover hop for distance.

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