

## HIP ARTHROSCOPY

<u>Postop</u>	<u>Goals</u>	<u>Precautions</u>	<u>Exercises/Interventions</u>
<b>Weeks 0-2</b> <b>PT 1-2x/ week</b> <b>HEP Daily</b>	Protect incisions/repair Early ROM with bike Gait training PWB with crutches. Modalities PRN	PWB (50%)  No hip ER >20° No hip flexion >90° No hip Abduction >45° Avoid ROM that causes pain Avoid iliopsoas tendonitis (resisted hip flexion, SLRs)	Bike upright with no resistance for 20 min per day (up to 2x per day) ROM as tolerated within defined limits  Hip isometrics (no flexion) Pelvic tilts Supine bridges NMES to quads with short arc quad exercises Sustained stretching for psoas
<b>Weeks 2-4</b> <b>PT 1-2 x/ week</b> <b>HEP Daily</b>	Continue with previous Wean crutches Progress hip ROM Progress core strength Progress hip strength	Progress to WBAT with crutches (week 2) Wean off crutches (2->1->0) weeks 3-4 if gait normalized Avoid heavy hip flexor strengthening	Bike (progress time/resistance) Gait training per WB restrictions Progress hip ROM Glute/piriformis stretching Progress core strengthening Step downs Clam shells Hip hiking Proprioception/balance board Bilateral cable column rotations
<b>Weeks 4-8</b> <b>1-2 x/ week</b> <b>HEP Daily</b>	Continue with previous Introduce elliptical Progress ROM Progress LE strengthening Progress core strengthening Progress balance	WBAT Wean off crutches (2->1->0) weeks 3-4 if gait normalized Avoid heavy hip flexor strengthening	Introduce elliptical ROM – prone hip rotations, hip flexor/glute/piriformis/IT stretch LE strength – hip flexion isotonic, leg press (progress to unilateral), isokinetic knee flex/ex Core strength – prone/side planks Balance – progress to unilateral and foam Side steps with thera-band

<b>Weeks 8-12</b> <b>1-2 x/ week</b> <b>HEP Daily</b>	Progress hip ROM Progress strength Increase endurance	WBAT Avoid painful activities	Progress ROM Progress LE/core strength (Unilateral leg press, Step downs  Dynamic balance Light plyometrics Progressive treadmill walking <b>(Week 10)</b>
<b>Weeks 12-16+</b> <b>PT 1-2x/week</b> <b>HEP daily</b>	Progress ROM Progress hip/core strength Progress balance	WBAT Avoid painful activities	Begin running program (AlterG if available) Progress strength Advance plyometrics Sports specific agility drills

## Physician-Specific

### Typical Schedule of follow-up visits with physician after surgery:

- They follow up 10-14 days, 6 weeks, 3 months, 6 months

### Typical Medications:

- Patient and Physician dependent.

### TED hose:

- 2 weeks

### Dressings:

- Dressing left in place until follow up if clean and dry