

Hip Arthroscopy Procedure: Labral Repair or Debridement & Boney Work

Christopher M. Larson, M.D.

ROM Restrictions and Expectations:

Extension:	External	<u>Internal</u>	Abduction
Avoid passive	Rotation	Rotation	0° to 45 ° by
extension x 3 weeks	Avoid extreme ER x 3 weeks	No limitations	2 wks

Stop shy of pinchy pain with all PROM NO straight leg raises in flexion.

Weight Bearing Restrictions:

Toe touch WB 2 wks, progress to FB

> 20lbs max foot flat WB

> 3 wks if older than 50 or osteopenic bone

DC crutches ~ 3 wks, when gait is normal and pain free

If Significant Microfracture: toe touch WB 3-5 wks as instructed.

Phase I (ROM and initial strengthening)

If microfracture Hold activities in shaded boxes () until 6wks in all phases

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Date of Surgery:	Week	1	2	3	4	5	6			
Stationary Bike up to 20 min. > Well member for day 1 to 4, progress per patient tolerance	Daily	✓	√	✓	✓					
Passive ROM / Circumduction > ER limitation see above	Daily	✓	√	✓	✓	✓	✓			
Isometrics: 2x/day ➤ Quads, Hams, Glute max , Transverse abdominus (TA)	Daily	✓	✓							
Soft Tissue Work/Scar Mobs	Daily	✓	✓							
Muscle Stretch: ➤ Quad, Adductor, HS	Daily	✓	✓							
Stomach Stretch Lie flat on stomach up to 15 min	Daily	✓	✓	✓	✓					
Quadruped Rocking > Ok with labral repair	Daily	✓	✓	✓	✓					
Prone Pendulum (IR/ER on stomach)				✓	✓	✓	✓			
Standing Hip Abduction in IR					✓	✓	✓			
Bridging Progression			✓	✓	✓	✓	✓			
Start Phase II exercise if no microfracture	•		✓							
Start Phase III exercise if no microfracture					✓					

Cardio exercises on reverse side (start ~ 4 weeks)

Phase II Stability

Phase II: Stability	Week	3	4	5	6	7	8	10
D/C crutches; start at 3 wks > non-antalgic gait	Daily	√	√					
Prone Hip Extensions	5x wk	✓	✓	✓				
Prone Hamstring Curls	5x wk	✓	✓	✓				
Prone Pendulum (IR/ER on stomach)	5x wk	✓	✓	✓	✓			
Standing Hip Abduction in IR	5x wk		✓	✓	✓			
Pool Therapy	5x wk			✓	✓	✓	✓	✓
Bridging Progression*	5x wk	✓	✓	✓	✓	✓		
⅓ Knee Bends * > 2 legs	5x wk	End of wk 3	✓	√	√	√		
Butt Back quat	5X wk		✓	✓	✓	✓	✓	
Start Phase III exercise if no	microfracture		✓					

^{*}Bridges can start around week 3 unless weight bear restrictions (can start week 2 if needed)

^{*}If Microfracture hold $\frac{1}{2}$ knee bend until wk 3-6 based on wt bear restrictions.

^{*}Start Phase III activities at 4 weeks post-op



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Phase III (if microfracture hold all WB activities until wk 6)

Phase III: Functional Strengthening	Week	4	5	6	7	8	10	12	16
Leg Press	3x wk	✓	✓	✓	✓	✓			
Single Leg Balance	3x wk		✓	✓	✓	✓	✓		
Box step up	3x wk			✓	✓	✓	>		
Bosu	3x wk			✓	✓	✓	>	✓	
Lunges- forward 90	3x wk			✓	✓	✓	✓	✓	
Lateral Lunge	3x wk			✓	✓	✓	✓		
Single Knee Bends - 1 wk after start of lunges				✓	✓	✓			
Lateral walk - With squat and Band	3x wk			✓	✓	✓	>		
Agility - Diagonal lateral agility	3x wk					✓	✓	✓	✓
Side Planks	3x wk	✓	✓	✓	✓	✓	✓	✓	✓
Prone Planks	3x wk		✓	✓	✓	✓	✓	✓	✓
Single Leg Bridges	3x wk		✓	✓	✓	✓	✓	✓	✓
Rotational Activities (if painfree)						✓	✓	✓	✓

Phase IV

Phase IV: Return to Activity/ Sport	Week	16	20	24
Sport Specific Drills / TRAINING		✓	✓	✓

^{*}Typically 4-6 months to return to sports, 1 yr for maximal recovery*

Start cardio at 4 weeks if glute strength is present, if microfracture wait until 6 weeks

Cardio/Functional Exercise-Skating/Running/ETC.

Cardio / Functional	Week	4	5	6	7	8	10	12	12-24
Stationary Bike with resistance	3x wk	✓	✓	>					
Elliptical Machine	3x wk			>	✓	>	✓	~	✓
Outdoor Biking (Resisted Biking)	3x wk				✓	>	✓	~	✓
Functional Activity (hike, kick, throw)	3x wk					✓	✓	✓	✓
Sport Specific Progressions	3x wk						✓	✓	✓

Excessive activity, including cardiovascular exercise, may lead to the return of anterior hip pain if ample core and glute strength is not present.

^{*}Microfracture can delay this recovery by 1-5 months*