

REHABILITATION PROTOCOL: HIP ARTHROSCOPY LABRAL REPAIR

☐ Phase 1 (Weeks 0-6)

- Weight bearing: Partial weight bearing using two crutches
- Brace 6 weeks to prevent rotation/ abduction
- Normalize gait pattern with crutches
- Range of motion
 - No external rotation/ hyperextension/ FABER
 - AAROM flexion and internal rotation
- Therapeutic exercises
 - Supine hip log rolling for internal rotation
 - Pelvic tilts
- Bike for 20 minutes/day (can be 2x/day)

☐ Phase 2 (Weeks 6-8)

- Weight bearing: As tolerated, discontinue crutch use
- Progress range of motion
 - Bent knee fall outs
 - Stool rotations for ER
- Therapeutic exercises
 - Step downs, hip hiking
 - Clam shells- isometric side lying abduction
 - Begin proprioception and balance training: balance boards, single leg stance
 - Bilateral cable column rotations
 - Treadmill side stepping from level surface holding on → inclines
 - Aqua therapy in low end of water
 - Hip flexor, gluteus/piriformis/ITB stretching- manual and self
 - Hip flexion isotonic (beware of hip flexor tendonitis)
 - Multi-hip machine (open/closed chain)
 - Leg press
 - Isokinetics: knee flexion/extension
 - Core strengthening: prone/side planks
 - Progress proprioception/balance
 - Progress cable column rotations- unilateral → foam
 - Side stepping with theraband

☐ Phase 3 (Weeks 8-12)

- Weight bearing: full
- Range of motion: full and painless
- Therapeutic exercises
 - Endurance activities around the hip
 - Dynamic balance activities

☐ Phase 4 (Months 3-6)

- Progressive LE and core strengthening
- Plyometrics
- Treadmill running program when cleared by surgeon
- Sport specific agility drills