

Hip Arthroscopy Rehabilitation Protocol

WEEK 1-2:

Weight Bearing

• 50% Partial Weight Bearing with crutches

Brace

- Wear brace at all times for first 2 weeks except for exercises and hygiene
- · Wear brace at night

ROM

- · Avoid pinching feeling with ROM
- Flexion: 0-90°
- Extension: 0° (avoid hyperextension)
- Abduction: 30°
- IR in 90° of flexion: Neutral
- ER in 90° of flexion: 30°

Therapeutic Exercise

- Exercise bike without resistance immediately (POD#1 if possible)
- Isometrics: Quad setting, gluteal setting, hamstring digs with knee support, plantarflexion/dorsiflexion, eversion/inversion strengthening
- Prone lying
- STM mobilization, scar massage
- No joint/capsular mobilizations

WEEK 3-6:

Weight Bearing

Transition to full weight bearing

Brace

Transition away from brace

ROM

As tolerated within pain free ROM

Therapeutic Exercise

- Avoid straight leg raises (flexion) to prevent post-operative hip flexor tendonitis
- Continue to protect repaired tissue, avoid joint/capsular mobilizations
- Restore hip ROM
- Restore normal gait pattern
- Weight shifting
- Step over small obstacle on non-operative leg emphasizing hip extension on operative leg
- Emphasize gluteus medius strengthening (clamshells, side lying abduction)
- Stationary bike without resistance add resistance at Weeks 5-6

WEEKS 6-12:

Weight Bearing

Full

Brace

None

ROM

Full

Therapeutic Exercise

- Begin straight leg raises (flexion)
- · Continue to protect repaired tissue, avoid joint/capsular mobilizations
- Progress gluteus medius strengthening (single leg balance on foam pad, then bosu ball, side steps with therband)
- Stationary bike with resistance
- Slide board if without pain
- Crab / Monster walk

WEEKS 12+:

Weight Bearing

Full

Brace

None

ROM

Full

Therapeutic Exercise

- Treadmill walking, progressing to jogging if tolerated
- Single leg squats
- Lunges
- Side planks
- Plyometrics
- Sport Specific Training if hip strength 80% of contralateral side
- Return to sport 4-6 months if cleared by MD