



## HIP ARTHROSCOPY LABRAL REPAIR REHABILITATION PROTOCOL

Mauricio F. Herrera, MD

305-595-1317

[drsports@me.com](mailto:drsports@me.com)

[www.herreraspportsmedicine.com](http://www.herreraspportsmedicine.com)

### Post-Op Days 1-6

Considerations/Goals:

- Avoid adhesions and subsequent ROM loss
- Avoid anterior and lateral impingement/Protect the capsule
- Decrease inflammation and pain
- Avoid hip flexion >90°, hip abduction >45°, ER and Extension
- PWB - 20% of body weight
- No SLR x 4 weeks
- Pt should lie prone 2+ hrs per day as well as immediately after CPM use

Treatment

- Stationary bike on POD 1 – High seat to avoid anterior impingement
- POD 2 – Gentle hip isometrics in neutral
- Passive ROM in pain free range within allowed ranges
- Passive circumduction – teach family members so pt can do it BID x 4-6 weeks
- Gentle repetitive passive hip IR
- Quad sets/Glut sets
- Well leg exercises/core exercises/lumbopelvic stabilization
- Modalities PRN

### Post-Op Days 7-13

Considerations/Goals:

- Continue to monitor ROM and compliance with PWB, CPM use, HEP
- Focus on gluteus medius and maximus activation

Treatment - Continue with above plus:

- Bridging
- Quadruped Rocking (Flexion <90°)
- Half Kneel Hip IR
- Soft tissue manipulation - avoid disrupting incision sites
- Avoid active hip flexion

### Post-Op Days 14-27

Considerations/Goals:

- Continue to monitor ROM and compliance with PWB, CPM use, HEP
- Focus on gluteus medius and maximus activation

Treatment - Continue with above plus:

- Begin AROM in pain free range, exercise caution with excessive flexion
- Gentle scar mobilization once incisions fully healed
- Increase passive ROM beyond initial restrictions as tolerated by patient (pain-free range)
- Avoid prolonged ER
- Pool walking/Aqua Jogging

## **Post-Op Day 28 +**

Considerations/Goals:

- Continue to monitor ROM and compliance with CPM use, HEP
- Increased WB as per MD
- Restore muscle balances across the hip
- Eliminate substitution patterns
- Include rotational stability and motor control patterns of hip and lumbo-pelvic complex
- No impact activities until 3 months post-op

Treatment – Continue with above plus:

- Full stretching of all muscles that cross the hip joint/full PROM
- PREs as tolerated OKC/CKC after cleared for WBAT/FWB
- Balance and Proprioceptive re-training

## **Post-Op 3 months**

May begin impact sports

## **Other Considerations**

- Microfracture will increase PWB time up to 6 weeks