

Post op Hip Labral Repair Physical Therapy Protocol

Phase I: Initial 0-4 weeks

- WB status: TTWB weight bearing. If microfracture is performed NWB status is maintained for 6 weeks.
- ROM limits for 2 weeks post op: Hip flexion to 90 degrees, Extension to 0-10 degrees, and Abduction to 25 degrees. Gentle hip IR and ER are suggested.
- Strengthening recommendations:
 - Isometrics can begin immediately following surgery (hip, quad, HS, and abs).
 - AROM can be progressed in week 2 and weight bearing exercises can be introduced as weight bearing status allows.
 - AVOID SLR to avoid iliopsoas tendonitis.
 - Precautions: No figure four position for six weeks
- Stretching:
 - prone lying to stretch the iliopsoas permitted in addition to uninvolved knee to chest.
 - Stretch to tolerance not beyond. Gentle passive ROM is encouraged within pain tolerance.

Criteria for progression: Normalized gait pattern without assistance, 80% full ROM, minimal pain

Phase II: Intermediate 4-8 weeks

- Pain-free full PROM - grade III-IV joint mobilizations can be used to gain ROM
- Continue stabilization and strengthening progressing resistance and weight bearing exercises as tolerated. Core stabilization and cardiovascular endurance can also be utilized.
 - ease into hip flexor strengthening as patient tolerates; avoid excessive repetition

Criteria for progression: symmetrical bilateral leg squat to 70 degrees knee depth, uncompensated single leg stance, ability to perform all functional activities without pain or unloading the affected leg while maintaining good control; symmetrical ROM

Phase III: Advanced 8-12 weeks

- Progress single plane concentric/eccentric movements, tolerate single limb support
- Begin impact control exercises (2 foot to 2 foot) in a single plane progressing to 1 foot to 1 foot in multiple planes.
- Agility and plyometric exercises.
- Proprioception on multiple surfaces with perturbation
- Can progress to running program after 9 weeks post op and if the patient can demonstrate good single leg landing control without pain.
- Sport specific drills
- Continue hip and core strengthening and stretching.

Criteria for progression: pain free and accurate performance of all exercises; pass hop, squat tests or other return to play test such as SportCord test. PHYSICIAN CLEARANCE

Phase IV: 12+ weeks - Return to sport

- Multiplanar dynamic movements that require increased load capabilities of the LE

- Power, plyometrics, and performance training
- Monitor return to sport to ensure other compensatory patterns and to manage additional flare ups before progression to re-injury.