Rehabilitation Protocol: hip arthroscopy labral repair

**⁮ Phase 1 (Weeks 0-4)**

* Weight bearing: Partial weight bearing using two crutches
* Brace 4 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)- if instructed by surgeon

**⁮ Phase 2 (Weeks 4-8)**

* 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 isotonics (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