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