

Dr. Brent Carlson

Hip Arthroscopy with Acetabuloplasty

Patient: \_\_\_\_\_

Chippewa Valley Orthopedics & Sports Medicine

4212 Southtowne Drive 757 Lakeland Drive, Suite B  
 Eau Claire, WI 54701 Chippewa Falls, WI 54729

DOS: \_\_\_\_\_

	Phase I			Phase II			Phase III		Phase IV		
	Acute Care	Week 1	Week 2	Week 3	Week 4	Week 5	Week 6	Week 7	Week 8	Week 9-11 and beyond	
Weight Bearing**	25%	25%	50%	50%	50%	WBAT					
<p>Exercises are introduced on a weekly basis. <b>Please continue with previous exercises to ensure good flexibility and strength.</b>                      Prescription may alter this protocol. Please call Dr. Carlson with questions.</p>											
<b>Exercises: Progress per protocol. Stretch, soft tissue mob, for 6-10 weeks.</b>	Ankle pumps	Add/Abd isometrics	Bike, No resistance	Standing hip Flexion and extension	Seated Active Hip Flexion On Exercise ball and Other core Exercises on ball	Double 1/3, 1/2 partial squats Total Gym	Light Leg Press	Stretch End range motions of hip	Lunges	<b>Goals of Phase III:</b> Restoration of muscular endurance, strength and cardiovascular endurance. Optimize neuromuscular control/balance. Proprioception. <b>Criteria to advance to Phase IV:</b> Single leg mini squat with level pelvis Cardiovascular fitness to pre-injury level Demonstrate initial agility drills with proper body mechanics. <b>Return to competition</b> with full ROM, equal hip strength, no pain with all specific agility drills and ability to tolerate running program.  <b>Please see Advance Hip Arthroscopy Protocol for Weeks 9 and beyond. Functional Testing for return to sport or high level activity.</b>	
	Passive supine Hip IR and active IR roll	Heel slides		Supine Marching							
		Double leg Bridges									
<b>Home CPM-</b> This will be set-up at the hospital and then be used at home as well. Use machine starting at 0-45° increase to 90° hip flexion as tolerated, 1 hour increments, 4 hours per day. Use your best judgment for hip position. The number on the pendant measures knee motion.	Gluteal, Quad, Hamstring Isometrics	PROM-IR	Active Supine Hip IR	Superman Prone and then Quadraped	AROM In all directions of hip	Side Plank	Elliptical	Side-step, add resistance as tolerated	Lateral agility		
	Pain dominant Hip mobs, Grade I and II Gentle long axis circumduction, CW/CCW.	Soft tissue mobilization, IT Band TFL, glut med, area surrounding incisions, scars.	Prone On elbows	Stiffness Dominant Hip mobs Grade III and IV	Add resistive Tubing for Hip flexion	Adduction	BOSU squats	Ham curls	Single leg stance, carpet then varied surfaces. Add perturbation		Single leg Knee bends
			Standing Hip Abduction Adduction	Prone Knee Flexion	Sidelying Hip Abduction Adduction Prone Hip Extension	Advance Pool Activity Fins, flutterkick Step ups	Clocks	Swim: Water Plyo's Running			
			Trunk Rotation								
	<b>RESTRICTIONS:</b> In place for 6 weeks * Hip Flexion no Greater than 90 *Avoid ER past Neutral  **Microfracture 6 weeks NWB**	<b>Goals of Phase I:</b> Restore ROM Diminish pain and inflammation Prevent Muscular inhibition Normalize gait with 50% WB restriction.									
<b>Criteria to advance to Phase II:</b> Minimal pain with phase I exercises, minimal range of motion limitations. Normalized heel to toe gait with 50% WB											
					<b>Goals of Phase II:</b> Restore pain free ROM, initiate proprioception exercises, normalize gait <b>Criteria to advance to Phase III:</b> Minimal pain with phase II exercises. Single leg stance with level pelvis.						

**Questions? Please call:**  
**Northwoods Therapy Associates**  
**Eau Claire, WI**  
**715 839 9266**  
**Chippewa Falls, WI**  
**715 723 5060**