POSTERIOR TOTAL HIP ARTHROPLASTY

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Patient	
DOS	

ACUTE CARE STAY OUT-PATIENT THERAPY				NOTES:
Week 0	1.2 masks mask amanating		7 12 males most amounting	
Ankle Pumps, Quad Sets	1-3 weeks post-operative	4-6 weeks post-operative	7-12 weeks post-operative	These patients may be in a bit
Gluteal Sets, Heel slides	Continue post-op exercises	Continue stretches	Progress ROM within	less pain than the anterior
Gluteal Sets, Heel slides	Continue post-op exercises	Continue stretches	restrictions and strength to	approach THA.
DOM restrictions	AROM-supine, sliding with	Continue strengthening	WNL or equal to opposite	TT1 : 1.6
ROM restrictions:	assist to encourage ROM	Continue strengthening	extremity	There is no need for
No specific ROM restrictions	within restrictions	Progress to:	extremity	mandatory walker use due to
D - 1 1:11/	within restrictions	Hip Abduction with resistive	Progress strangthening of	less risk for iatrogenic fracture
Bed mobility:	Long Ama Oyad	•	Progress strengthening of	compared to anterior THA.
May sleep on uninvolved side	Long Arc Quad	tubing in hook lying.	Quad and Hip groups	
with pillow in between their	III.a adduston and abduston	Clamshell	Total arms with air als less	Dr. Carlson does not detach
knees.	Hip adductor and abductor	Ciamsneii	Total gym with single leg	the gluteus maximus and he
AND ADD. 11	isometrics in hook lying	D-1 111-1	Minimonata	makes certain these patients
WBAT with assistive device.	T	Balance-double leg to single	Mini squats	are stable through
unless modified my MD.	Transverse abdominus	leg	XX 11	hyperflexion of knee to chest
Progress gait as able, no	isometrics and bridging	T. 4.1.C	Wall sits	and internal rotation past 80°
limping.	G. II III AL L	Total Gym		intraoperatively so hip
~ .	Standing Hip Abduction,		Step-ups forward and lateral	precautions are meant to allow
Stairs	Extension and Flexion	Sub-max isotonics for hip, 1-5	D 1	tissue relaxation post-op for 4
	D.1. 1. 1	pounds	Balance	weeks.
ADL Education: Use devices	Bike, high seat			
as needed for soft tissue		Walking activation	D/C device when walking	Progress to functional
discomfort needs. Pt should be	Heel raises	- March	without a limp	program as tolerated. Prepare
encouraged to walk regularly.		- Sidestep		for back to work, and
		- Backwards	Address work and recreational	recreational activities.
			functional activity demands.	
		Bike		This protocol should be
Any Questions? Please contact:		5 1 5		interpreted as a continuum. If
Northwoods Therapy Associates		Pool Therapy		a patient is progressing ahead
Altoona, WI Chippewa Falls, WI				of the time schedules, advance
(715) 839-9266 (715) 723-5060				them as tolerated.
April 2022				