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ORTHOPAEDIC SURGERY
FRACTURES
JOINT REPLACEMENT
SPORTS MEDICINE

HIP ABDUCTOR REPAIR PROTOCOL (Gluteus Medius/Minimus Repair)

The following protocol should be used as a guideline for rehabilitation progression, but may need to be altered pending the nature and extent of the surgical procedure, healing restraints or patient tolerance.

- Patient will be released from the hospital the same day as surgery.
- Patient will be TTWB-PWB <30 pounds (determined by MD) for the first 4-6 weeks post-operatively and will need to use crutches or another assistive device. After 8 weeks, weight bearing will progress gradually according to patient tolerance.
- Patient should limit hip flexion to about 90 degrees in order to avoid stress to the repair site.
- Patient should also avoid excessive external rotation or internal rotation of the hip for 4-6 weeks post-operatively in order to avoid stressing the repair site.
- Surgical dressing should be removed 2 days post-operatively.
- Patient may shower at 2 days post-op, but soaking in a tub should be avoided until scope wounds are healed and swelling is controlled.
- Begin outpatient physical therapy 2-3 days post-op.
- The rehab program will proceed cautiously for the first 2-3 months, after which functional progression will be determined by patient's tolerance to the exercises and general activity.
- Patients may feel like they are doing better than they really are at approximately one month post-op, so they should still be reminded to be cautious in order to avoid symptoms of overdoing their activity. Controlled activity level will lessen the risk of a setback. **Time and patience are of the utmost importance in the recovery process.**

ABDUCTOR REPAIR PROTOCOL

PHASE 1: INITIAL PHASE

Week 1

- Ankle pumps
- Glut sets
- Quad sets
- Hamstring sets
- Adductor isometrics
- Heel slides
- Pelvic tilts
- Double leg bridges
- Seated knee extensions
- Prone on elbows → Press-ups for Iliopsoas and Abdominal stretch (avoid low back pain)
- Prone knee flexion → prone on elbows with knee flexion
- Standing hip flexion and extension (depending on comfort level) hip exercises without resistance
- Hip mobilization (grade I) – PRN for pain relief

Week 2

Continue with previous exercises, but may add:

- Supine marching with PPT (90 degrees)
- Modified dead bug with PPT (90 degrees)
- Superman in prone on a pillow
- Supine hamstring stretches with a belt
- Supine Iliopsoas/Rectus Femoris stretch with involved leg off of table as tolerated
- Stationary bike without resistance
- Standing 2 way hip exercises with Theraband resistance – start very low resistance

Week 3

Continue with previous exercises, but may add:

- Leg raises – extension and flexion
- Seated physioball progression of hip flexion
- Active range of motion with gradual end range stretch within tolerance

Patient may progress to Phase 2 when they have achieved the following: minimal pain with phase 1 exercises, 90 degrees of pain free flexion, minimal range of motion limitations with internal rotation/extension/abduction

PHASE 2: INTERMEDIATE PHASE

Weeks 4-6

Continue with previous or modified versions of previous exercises, but may add:

- Crunches
- Double leg bridges on the ball
- Gradually increase resistance with stationary bike
- Standing adduction with theraband resistance
- Aquatic exercises- flutter kick, swimming, 4 way hip with water weights as tolerated, step ups
- Superman in quadruped
- Single leg bridges as tolerated

Patient may progress to Phase 3 when they have achieved the following: 105 degrees of flexion, 20 degrees of ER, hip flexion strength >60% uninvolved side, adduction/IR/extension/ER strength 70% uninvolved side, pain free with phase 2 exercises

PHASE 3: ADVANCED PHASE

Week 7

Continue with previous or modified versions of previous exercises, but may add:

- Log rolling
- Calf Raises
- Physioball exercises – hip lift, bent knee hip lift, hamstring curls, balance

Week 8 (start to wean off of crutches)

Continue with previous or modified versions of previous exercises, but may add:

- Mini squats
- Leg press (start with minimal resistance and increase by patient tolerance)
- Step-Up
- Side stepping over cones
- Core strengthening on physioball
- Abduction isometrics- minimal resistance without pain

Week 9

Continue with previous or modified versions of previous exercises, but may add:

- Standing abduction without resistance
- Elliptical
- Seated IR/ER
- Clamshells

Week 10

Continue with previous or modified versions of previous exercises, but may add:

- Sidelying abduction without resistance as tolerated (instead of standing)
- Single leg balance
- Abduction and adduction leg raise
- BOSU squats

Patient may progress to Phase 4 when they have achieved the following: gluteus medius strength 60-70%, patient can perform phase 3 exercises without pain, pain-free, normal gait pattern.

PHASE 4: SPORTS SPECIFIC REHAB CLINIC BASED PROGRESSION

Weeks 11-15

Continue with previous or modified versions of previous exercises, but may add:

- Standing abduction with Theraband resistance as tolerated without pain
- Pool running
- Lateral step ups
- Elliptical
- Step drills, quick feet step ups, forward, lateral, carioca
- Plyometrics – double leg and single leg shuttle jumps
- Theraband walking patterns 1 rep of six exercises at 50 yards – forward, sidestepping, carioca, monster steps, backward, half circles.
- Sidestepping with resistance – can use sports cord
- Single leg body squats
- Lunges – from single plane to tri-planar; add medicine balls for resistance
- Sport specific training

Patient may progress to final phase when they have achieved the following: single leg mini squat with a level pelvis, can perform phase 4 exercises with proper body mechanics and without pain.

FINAL PHASE

Weeks 16+

Continue with previous or modified versions of previous exercises, but may add:

- Running progression
- Sport specific drills
- Traditional weight training
- Plyometric training

Criteria for full return to sport:

- **Full range of motion**
- **Hip strength equal to uninvolved side; single leg pick-up with level pelvis**
- **Ability to perform sport-specific drills at full speed without pain**
- **Completion of functional sports test**
- **Restore full gluteus medius strength before higher level activities are added**