

Rehabilitation s/p Hip Arthroscopy, Femoro/Acetabuloplasty with or without Labral Repair

These guidelines, treatments, and milestones have been established to assist in guiding rehab based on the most current available evidence. They are not intended to be a substitute for sound judgement with consideration of the individual contextual features of the patient and the demands of various functions/sports.

Weeks 0 -6 Protective/Inflammatory Phase

Recommend PT follow up 2 times per week

Milestone to advance to next phase: Full PROM of hip by 2 weeks, D/C of crutches with a non antalgic gait pattern, controlled pain, and inflammation

Precautions for iliopsoas tendonitis and protection of surgical site:

Rehabilitation s/p

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Saint Louis University SSM Health Physical Therapy Orthopedic Residency
in Collaboration with SLUCare Physicians

~ With incorporation of environmental distractions

Recommended Functional Tests:

~ Y-Balance⁴

Weeks 12+ (Initiation of sports activity)

Recommend PT follow up: 2 times per week

Milestone to progress to next phase:

- Ability to perform single leg plyometrics without symptoms or compensatory patterns
- Ability to perform sport specific drills at full speed

Recommendations

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~ Emphasis on proper takeoff and landing mechanics
- ~ Drop jump
- Begin running progression when able to perform 2000 plyometric foot contacts without reactive pain or effusion
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~ Z Œ v š } ^ } Œ v • • Z μ o • ~ • o }Á •
~ Progress distance/time prior to progressing speed
- ~ Progression of running load 10% weekly is recommended, avoiding progression >30%.
- Sport specific drill training
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Discharge Criteria:

- Patient reported outcome score:
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~ Hip Outcome Score⁶ %o } Œ š • ^ %o] (] ~ μ ^ ^ • o ~ , K ^
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Please respond to our anonymous survey regarding these guidelines to assist in improving patient care and advocacy.

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	Track Running Program ¹⁹ Adapted from University of Delaware Physical Therapy Clinic	Treadmill Running Program ¹⁹ Adapted from University of Delaware Physical Therapy Clinic
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Level 1

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