



Kansas City Sports Medicine

Sports Medicine & Arthroscopy

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Sports Medicine and Arthroscopy

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Rehabilitation Program for the Hip

Following Hip Arthroscopy for Labral Tear



Weeks 1 to 2: Early Motion Phase

Weight Bearing: Crutches 5 to 7 days, progress to full weight bearing with comfort and stability

ROM Goals:

Extension: 10 degrees
Flexion: 100 degrees
Abduction: 30 degrees
Adduction: 30 degrees
Internal rotation in flexion: 20 degrees
External rotation in flexion: 70 degrees

Therapeutic Exercises:

Strengthening: Quad sets
Conditioning: Stationary bike 5 to 10 minutes
Cryotherapy: 6 to 8 times a day for 20 minutes

Weeks 3 to 4: Advanced Motion Phase

Weight Bearing: Full

ROM Goals:

Extension: 20 degrees
Flexion: 120 degrees
Abduction: 45 degrees
Adduction: 45 degrees
Internal rotation in flexion: 30 degrees
External rotation in flexion: 90 degrees

Therapeutic Exercises:

Strengthening: Quad sets, four-way straight leg raising
Proprioception: Weight shifting
Conditioning: Stationary bike, less than 15 minutes

Weeks 5 to 6: Strengthening Phase

Weight Bearing: Full

ROM Goals: Full

Therapeutic Exercises:

Strengthening: Closed chain: half squats, step downs, etc.
Proprioception: Weight shifting, Balance activities
Conditioning: Stationary bike, Treadmill

Weeks 7 to 8: Advanced Strengthening Phase

Therapeutic Exercises:

Strengthening: Closed chain, Multi plane single leg, Hamstrings, Hip hikes
Proprioception: Weight shifting, Single leg balance activities
Conditioning: Stationary bike, Treadmill

Week 9, Month 4: Conditioning Phase

Therapeutic Exercises:

Strengthening: Closed chain, Multi-plane single leg, Hamstrings, Hip hikes, Multi-hip, Trunk bends, Plyometrics

Proprioception: Weight shifting, Balance activities

Conditioning: Stationary bike, Treadmill, Stair climber, Elliptical machine, Ski machine

Month 5: Return to Sport and Function Phase

Therapeutic Exercises:

Conditioning: Running straight

Note: Return to sport based on provider team input and appropriate testing. All times and exercises are to serve as guidelines. Actual progress may be faster or slower, depending on each individual patient, as agreed upon by the patient and his/her team of providers.