Blake M. Bodendorfer, MD 1 Edmundson Place Suite 500 Council Bluffs, IA 51503 712-323-5333 16221 Evans Plaza Omaha, NE 68116 402-991-9958



bbodendorfer@millerortho.com omahasportsdoc.com

Rehabilitation Protocol for Hip Debridement and Iliopsoas Lengthening

Week 0-1

- FFWB 25# and then gradual return to FWB
- Early passive ROM, circumduction

Precautions

- No active hip flexion for 3-4 weeks
- Focus on manual therapy including
- Glut strengthening and core activation

ROM restrictions

No restrictions

Joint Protection Patient education

- Avoid at all times actively lifting or flexing and rotating hip (thigh) for 2-3 weeks
- Assistance from a family member/care taker is important for transitioning positions for the 1st week after surgery
- Do not sit in a chair or with hip bent to 90 degrees for greater than 30 minutes for the first 2 weeks to avoid tightness in the front of the hip
- Lay on stomach for 2-3 hours/ day to decrease tightness in the front of the hip (patients with low back pain may have to modify positions

Continuous Passive Motion Machine

- Begin with machine motion set between 30 and 70 degrees and slowly increase to 0-120 degrees, progressively increasing 6-8 degrees/day
- Use 4 hours/day
- May decrease use by 1 hour if riding stationary upright bike for 20 minutes without resistance
- May break up usage of CPM in increments throughout the day

Week 1-2

- DO NOT PUSH THROUGH PATIENT'S PAIN
- ROM, Manual therapy, isometrics
- Begin gradual WB increase (avoid compensation on contra lateral side or surgical side)
- More advanced core and gluteal exercises
- Start close-kinetic chain exercises
- Begin balance exercises and advance difficulty as tolerated