



# The Orthopaedic & Fracture Clinic

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## PHYSICAL THERAPY

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## HIP LABRAL REPAIR & BONEY WORK

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### Weight-Bearing:

- Toe touch weight-bearing for two weeks (20 lbs. maximum)
- Three weeks if older than 50 or osteopenia bone.
- Begin to wean from crutches at three weeks, should continue with crutches until the patient has a normal gait.
- If Microfracture procedure toe touch weight bearing for six weeks:

### ROM Expectations/Restrictions:

- Flexion: 0 – 125 degrees by day 15
- Extension: 0 week 1, 0 plus post 15 days
- External Rotation: avoid extreme ER for 14 days
- Internal Rotation: No limitations.
- Abduction: 0 to 45 degrees by two weeks

### Exercises:

#### Phase 1 (0 – 2 Weeks)

- Stationary bike up to 20 minutes. Good leg assist primarily days 1 to 4.
- Passive ROM/Circumduction
- Isometrics: Quadriceps sets, Hamstring sets, Gluteal sets.
- Muscle stretches: Quadriceps, Hamstring, Adductors
- Stomach stretch: Lie flat on your stomach for up to 15 minutes.
- Quadruped Rocking

#### Phase 2 (3 – 4 Weeks)

- Wean from crutches beginning at week three. Non-antalgic gait necessary to discontinue
- Hip rotation with stool
- Prone hip extensions
- Prone hamstring curls
- Standing hip abduction in internal rotation
- Bridging with progression as tolerated

- Butt back squat \*
- Half knee bends (2 legs) \*

If Microfracture procedure hold \* exercises until 6 weeks post-surgery.

#### Phase 3 (5 – 8 Weeks)

- Leg press
- Single leg balance

Begin below exercises at 6 weeks post-surgery

- Box step up
- Single knee bends
- Bosu
- Lunges forward to 90 degrees
- Lateral lunge
- Lateral walk with band

#### Phase 4 (9 – 24 weeks)

- Advance exercises as previously outlined
- Sport specific drills to begin at 16 weeks if pain free and full mobility of the hip

Return to sports participation is typically 4 to 6 months. One year for maximal recovery.