

Hip Abductor Repair Protocol

Updated: March, 2019

- A. 0-6 weeks post-op
 - 1. Gait: TTWB
 - 2. Precautions
 - 1. No adduction past neutral
 - 2. Protected WB Status
 - 3. No active hip abduction
 - 3. Frequent cryotherapy and modalities as indicated
 - 4. Exercise
 - a. ROM work within restrictions
 - b. OKC LE and core strength, avoid abductor firing
 - c. Stationary bike okay, no resistance

- B. 6-8 weeks post-op
 - 1. Gait: Slow transition to WBAT
 - 2. Continue cryotherapy and modalities as indicated
 - 3. Exercise
 - a. Slowly progress into CKC strength
 - b. Slowly progress into balance/proprioceptive work
 - c. AA to A hip abductor work as tolerated

- C. 8 weeks post-op
 - 1. Gait: WBAT to full, wean AD as gait quality allows
 - 2. Exercise
 - a. Progressive OKC strength
 - b. Progressive CKC strength
 - c. Progressive balance/proprioceptive work
 - d. Progressive core stab
 - c. Progressive non-impact cardio