



# ORTHOPEDICS & SPORTS MEDICINE

BAYCARE CLINIC®

## Dr. Klumb

### Total Hip – Anterior Lateral

#### Phase 1- Early Protective Phase (0-2 weeks)

##### Goals for phase 1

- Normalize gait pattern with proper lower extremity biomechanics
- Wean from assistive device.
- Pain and edema control
- DVT prevention
- Normalize muscle activation.

##### Other considerations

- No hip flexion past 90, IR past 0 degrees, and ADD past 0 degrees for the first 6 weeks

##### Post-Operative Physical Therapy

- 1<sup>st</sup> visit to occur 2-3 days post op

##### Weight Bearing

- Full weight bearing following surgery, unless otherwise stated in OP note
- Use AD for 2 weeks post op, wean to SPC when safe.

##### ROM

- **0-6 weeks:** No hip flexion past 90 degrees, hip IR past 0 degrees, and hip add past 0 degrees
- PROM and AROM in all planes within restrictions

##### Manual Therapy

- Scar massage when incisions are closed
- Avoid long axis distraction of the hip

##### Wound Care

- Wound should remain covered for the first 2 weeks

##### Edema Management

- Cryotherapy, 3x per day for 20 min each with leg elevated

##### Strengthening

- No squats for the first 6 weeks due to precautions
- Quadricep activation
- Heel slides, SAQ, LAQ, SLR 4-way, ankle pumps, bridges, glut sets, step ups, mini squats, etc.
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##### Neuromuscular Control

- DL balance – progress to unstable surfaces



## **Phase 2 – Intermediate Phase (2-8 weeks)**

### **Goals for phase 2**

- **Wean from assistive device**
- **Tolerate ADLs with minimal pain**

### **Ambulation**

- Wean from assistive device when appropriate LE motor control is achieved. No quad lag with SLR and no signs of quad inhibition.

### **ROM**

- 6 Weeks – Full Hip AROM and PROM

### **Manual Therapy**

- Patellar mobilizations
- Scar mobilization.

### **Edema Management**

- Continue to ice and elevate as needed to control pain and swelling.

### **Strengthening**

- Can start squats
- Avoid aggressive strengthening till after 6 weeks
- Wall squats, mini lunges forward and lateral, step ups -working to increase the height, 4 way hip, leg press, side steps with band, etc.

### **Neuromuscular Control**

- DL progressing to SL