Gregory Galano, MD

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Patient Name:

Date:

Date of Surgery:

Hip Rehabilitation: Proximal Hamstring Repair

Weeks 0-6

Goal:

• Protect surgical repair

Precautions:

- Foot-flat weightbearing with crutches for 6 weeks
- Hip abduction brace
- No active hamstring contraction
- No hip flexion greater than 45°
- No active knee flexion against gravity
- Knee extension limited pending intra-operative tension on the repair

Durable Medical Equipment

- Hip abduction brace with hamstring strap for 6 weeks to be worn all the time including when you go to sleep
- Crutches

Exercises:

- pelvic tilts (5 sec holds x 20/day)
- NMES c SAQ (1/2 bolster) with hip flexion less than 20 degrees
- isometrics hip abduction/adduction/external rotation (5 sec holds x 10/day)
- Quadriceps sets (4 x 20 reps/day)
- 5 Ankle pumps (20-30 reps/hour)
- Begin passive range of motion of the knee and hip at week 2. Do not exceed 45° of hip flexion. Do not allow knee extension beyond the restrictions stated above and limited by the brace.
- Begin gentle active range of motion of the knee and hip at week 4. Do not exceed 45° of hip flexion. Do not allow knee extension beyond the restrictions stated above and limited by the brace. No active knee flexion against gravity.

Other:

- Light desensitization massage to the incision and posterior hip
- scar massage
- silicon patch over incision

Weeks 6-9

Goals:

- Restoration of normal gait
- Weight-bearing progression to weight bearing as tolerated
- Return of pain-free functional ADL

Precautions:

- No hamstring strengthening exercises
- No hamstring stretching exercises

Exercises:

- Continue week 0-6 exercises
- May begin active knee flexion against gravity (concentric)
- Weight shifts
- Straight leg raises or SAQ into SLR
- Gentle quadruped rocking
- Gentle stool stretches for hip flexion and adduction
- Gluteus medius strengthening is progressed to isotonics in a side-lying position (clam shells)

Months 3-4

Goals:

- Return to unrestricted activities of daily living (ADL) at home and work
- Hamstring strengthening

Exercises:

- Continue week 6-9 exercises
- Begin hamstring flexibility exercises
- Begin hamstring strengthening exercises
 - Begin with hamstring curls strengthening exercises with the patient standing with the hip joint held in neutral position and the lower leg moving against gravity in pain-free arcs
 - Resistance is increased a pound at a time as tolerated with emphasis on high repetitions (50 reps) and high frequency (4-5 times/day)
 - When the patient is able to move through a full and pain-free knee flexion arc with 8-10 pounds of high reps, patients can transition from standing to machine hamstring curls.
- Begin total leg and hip strengthening exercises:
 - Quarter squats: Begin bilaterally and progress to unilateral status

- Heel raises: Begin bilaterally and progress to unilateral status
- Gluteus maximus strength exercises progress from prone (heel pushes with the knee flexed at 90° to hip extension with the knee flexed at 90° to hip extension with an extended knee) to supine (bilateral to unilateral bridging)
- Gluteus medius strengthening is further progressed to the upright position (hip hiking and multi-hip machine).
- Patients can begin unilateral knee extension and leg press activities with light resistance and increase resistance as the surgical hip tolerates.
- Balance and Proprioception (Balance board or foam dynadiscs)

Months 5-9

Goal:

• Completion of a functional program for the patient's return to sport activity

Exercises:

- Continue week 12 exercises
- Perform advanced proprioceptive training
- Closed kinetic chain hamstring exercises, such as advanced step downs, double to single-leg Swiss ball hamstring curls, resisted incline hip extensions, Roman dead-lifts, and half to full squat progression with progressive resistance, can gradually be introduced.
- Low level plyometrics, such as jump rope, step lunges in multiple directions with progression to walking lunges, can be introduced.
- Patient may begin a light jogging progression
- Return to sporting activities is typically allowed at 6-9 months postoperatively

Progression Criteria to Return to Sport

- No pain with normal daily activities
- Hip and knee range of motion within functional limits
- Community mobility without pain
- Hamstring strength is 75% of the contralateral side (concentric and eccentric)

DURATION: 2x/Week x 12 Weeks

Please send progress notes.

Physician's Signature:	
Gregory Galano, MD	