



Brian Bjerke, MD

# Hip Arthroscopy- FAI Correction and Labral Repair

## Post-Operative Protocol

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### Phase I – Maximum Protection (Weeks 0 to 3):

- Toe touch weight bearing x 3 weeks
  - Crutches used while toe touch weight bearing
- Avoid sitting in a hip flexed position for prolonged periods during the first few weeks to avoid hip flexor tightness
  - Lying flat on your stomach for a few hours a day is a good way to stretch out the hip flexors
- Range of Motion:
  - Flexion 0°- 90° x 2 weeks and progressing to 120° by week 3
  - Extension 0°
  - External rotation 0°
  - Internal rotation - no limits, work for full range
  - Abduction 0°-45°
- Exercise Progression:
  - Stationary bike with no resistance
  - Hip isometrics IR/ER (2x/day)
  - Glute, quadriceps, hamstring isometrics (2x/day)
  - Hip PROM (2x/day) flexion, abduction and IR supine at 90° and prone
  - Hip circumduction
  - Quadruped rocking

### Phase II – Progressive Stretching and Early Strengthening (Weeks 3 to 6):

- Goals:
  - Wean off crutches
  - Restore full ROM
  - Normalize gait
  - Improve strength and endurance
- Exercise Progression:

- Scar mobilization
- STM to quad, ITB, hip abductors and rotators as needed
- Comprehensive lower extremity flexibility program
- Bridging double and single
- Supine dead bug series (on foam roller)
- Hip abduction
- Quadruped hip extension series
- Standing open and closed chain multi-plane hip
- Standing internal/external rotation strengthening
- Step-up progression
- Squat progression
- Heel raises
- Stationary biking
- Deep water pool program when incisions are completely healed
- Stretching: quadriceps, piriformis and hamstrings

### **Phase III – Advanced Strengthening and Endurance Training (Weeks 6 to 12):**

- Exercise Progression:
  - Closed chain squat progression
  - Leg press and leg curl
  - Lunge progression
  - Walking program
  - Outdoor biking
  - Swimming
  - Shallow water pool running program
  - Basic ladder series
  - Advanced ladder series
  - Basic hurdle series

### **Phase IV – Return to Sport Program (Weeks 12 to 16):**

- Exercise Progression:
  - Maintain trunk, hip and lower extremity strength and flexibility program
  - Interval running program
  - Field/court sports specific drills in controlled environment
  - Sports test
  - Non-contact drills and scrimmaging – must have passed sports test
  - Return to full activity – per physician and therapist

**Return to full sports participation without restrictions is anticipated at approximately 4-6 months depending on sport. May take up to 1 year for maximal recovery.**

\*Please feel free to contact Dr. Brian Bjerke's office with any questions or concerns. Dr. Bjerke's care coordinator Andria Larson is available by phone at 95