

Standard Proximal Hamstring Tendon Repair

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Surgeon must specify on the referral any specific requests or deviations that fall outside the scope of this protocol.

Phase I (0 - 2 Weeks)	Phase II (Weeks 2 - 5)	Phase III (Weeks 5 - Discharge)
<p>PRECAUTIONS</p> <ul style="list-style-type: none"> No resistive HS activity No HS stretching Avoid sitting on affected ischial tuberosity Keep HS in relaxed/shortened position at the knee/hip <p>GAIT TRAINING</p> <ul style="list-style-type: none"> TTWB with crutches Stride length should not exceed the length of the patient's foot No brace is needed as the patient is able to stabilize the knee in a neutral hip position during WB that avoids excessive wound tension In special cases, the surgeon may recommend a knee brace locked at 30° for ambulation <p>EXERCISE</p> <ul style="list-style-type: none"> Quad sets Glute sets Ankle pumps Active heel slides to 30-45° knee flex 	<p>PRECAUTIONS</p> <ul style="list-style-type: none"> No resistive HS activity No HS stretching Able to sit in an elevated chair with knee flexed <p>GAIT TRAINING</p> <ul style="list-style-type: none"> WBAT progressing to FWB* with crutches when patient can actively perform SLR to 30° <p>* FWB with stride length not exceeding length of patient's foot</p> <p>Week 4</p> <ul style="list-style-type: none"> D/C crutches indoors when patient has good gait/postural control May progress to normal stride length with gait <p>EXERCISE</p> <p>Week 2</p> <ul style="list-style-type: none"> Supported mini squats to 20° knee flex Hamstring isometrics (pain-free) Prone knee flex/ext PROM SLR up to 30° <p>Week 3</p> <ul style="list-style-type: none"> Standing knee flexion AROM with ankle in PF Walking in place on soft surface Standing calf raises with straight legs <p>Week 4</p> <ul style="list-style-type: none"> Stationary bike with elevated seat if 70° hip flex and 90° knee flex are achieved Pool walking and sidestepping if wound is healed 	<p>GAIT TRAINING</p> <ul style="list-style-type: none"> Normal gait May begin to wean from crutch use outdoors <p>EXERCISE</p> <p>Week 5</p> <ul style="list-style-type: none"> Seated isometric HS with knee flex (6 sec on/off) Single leg march with theraband around ankle and anchored in front of patient Double leg bridge progressing to even weight distribution through involved leg (pain-free) <p>Week 6</p> <ul style="list-style-type: none"> Supine 90/90 active knee extension with no hold (pain-free) SLS Squats to 90° Prone SLR with slight hip IR, ER, and neutral (6 sec on/off) <p>Week 7+</p> <ul style="list-style-type: none"> Initiate gentle eccentric strengthening (with at least 2 days of rest in between) HS strengthening (SL bridge, lunges, etc.) Cautious jogging forward and backwards Jogging in place working on high knees as tolerated <p>CRITERIA to progress to return to sports phase:</p> <ul style="list-style-type: none"> Equal A/PROM 5 pain free max reps in prone and supine HS curls at various lengths (prone and sitting – 0° knee flex, 45° knee flex, 90° knee flex) Jog pain-free with symmetrical gait Good eccentric hamstring control Strength portion of LE functional test within 80% of uninvolved leg