



JOINT PRESERVATION INSTITUTE

Hip Labral Repair Rehabilitation Protocol

Labral repairs are limited by the inherent limitation of soft-tissue healing to bone. The full recovery from these procedures occurs after 6-9 months.

Avoid activities that lead to sustained pain.

Phase I- Immediate Post Surgical Phase (Protected Motion and Weightbearing- Days 1 to Week 6-PT OPTIONAL)

0-5 weeks

Pain Control.

Passive ROM of the hip to flexion of 90 degrees only. Patient to sit in reclining chair or upright. Toe touch weightbearing 30 lbs on surgical leg with walker or crutches at all times (especially if femoral neck osteochondroplasty has been performed)

NO COMBINED FLEXION AND ROTATION ACTIVITIES.

5-6 weeks

Very gentle active assisted ROM and passive ROM, no resistance.

Gait assistance, Proprioceptive Training

Water treadmill or AlterG at 50% of weight

Work up to strengthening with weight of leg only no more than 3 sets of 10 reps for flexion, abduction, adduction.

Proprioceptive training

Core strengthening

NO IMPACT ACTIVITIES

Phase II- Intermediate Phase-Moderate Protection Phase (Weeks 6-12)

6-12weeks

Goals

1. Restore full AROM and PROM

Ok to work on passive flexion up to 120 degrees but no combined flexion and rotation activities.

2. Protect Surgical Repair

3. Restore muscular strength and balance.

Work on progressive hip strengthening for flexion, extension, abduction, adduction.

Stationary bike, elliptical.

Phase III- Minimal Protection Phase (Weeks 13-20)

Resume activities of daily living

Ok to work on passive flexion up to 140 degrees with gentle combined rotation and flexion (very careful with flexion and internal rotation unless needed for sport activities such as hurdles)

Progress from jogging on treadmill to running starting at 18 weeks. Jumping okay to start at 18 weeks.

Restricted sports activities.

Phase IV- Return to Sports Phase (Weeks 21 and on)

Full sporting activities with no restrictions