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Hip Impingement Non-Operative Rehabilitation Protocol Prescription

Patient Name:

Date:

Diagnosis: *L / R Hip impingement – Labral tear*

Number of visits each week: 1 2 3 4

Treatment duration _____ weeks

_____ PRE - OPERATIVE

_____ NON - OPERATIVE

General Considerations

- Typically requires 6-8 weeks of supervised therapy
- **Phase 1: Tissue Healing Phase (1-2 x per week)**
 - Goals: Pain Control
 - Decrease tissue inflammation
 - Decrease swelling
 - Maintenance of motion (flexion 0 - 90°; IR as tolerated; ER 0 - 30°)
 - Early strength – isometrics
- **Phase 2: Early Functional Recovery (2 x per week)**
 - Goals: Full PROM
 - Progress to full AROM
 - Progress Strength Gains
 - AVOID FLEXOR TENDONITIS AND ABDUCTOR TENDONITIS!!!
- **Phase 3: Late Functional Recovery (3 x per week)**
 - Goals: Advance strength gains – focus on abductor and hip flexor strength
 - Balance and proprioception
 - Continue to monitor for development of tendonitis
 - Progress to sport specific activity depending on strength
 - Do not progress to running until abductor strength is equal to contralateral side
 - Progression to sport specific activities requires full strength return and muscle coordination

Caution

- Avoid anything which causes either anterior or lateral impingement.
- Be aware of Low Back of SI Joint Dysfunction.
- Pay close attention for the onset of Flexor Tendonitis and Abductor Tendonitis.
- Patients with preoperative weakness in proximal hip musculature are at increased risk for post-operative tendonitis.
- Modification of activity with focus on decreasing inflammation takes precedent if tendonitis occurs. This is not uncommon even within the first 3 months of treatment.

ADDITIONAL COMMENTS: _____

Concerns or questions:

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Physician Signature: