

Jay F. Deimel, MD

ORTHOPAEDIC SURGERY

SPORTS MEDICINE

PROXIMAL HAMSTRING REPAIR POST OPERATIVE PHYSICAL THERAPY PROTOCOL

Brace:

Week 0-6: Post-op brace at all times. May remove for showering and physical therapy.

After wk 6: Hip abduction brace is discontinued by physical therapist.

Weight Bearing:

Week 0-4: Foot flat weight bearing (20 lbs) with crutches

Week 4-6: Progress to 50% weight bearing with crutches as pain allows

After wk 6: Full weight bearing, transitioning out of brace to normal gait training

ROM:

Week 0-2: Passive hip ROM, 0-45 degrees, in brace. No active hamstring contraction. No active knee flexion against gravity.

Weeks 2-6: Progress 5 to 10 degrees per week to goal of 90 deg Passive hip flexion. No active hamstring contraction. No active knee flexion against gravity. Okay to initiate AROM after week 6.

Exercise:

Week 1-2: Ankle pumps, glut/quad squeezes, lumbopelvic stabilization, patellar mobs

Week 2-4: Ankle strengthening, passive calf stretching with 0 deg hip flexion

Week 4-6: Prone quad strengthening, sidelying hip abd/add, single/double limb balance

Week 6: Stationary bike, when 90 deg hip flexion obtained. Supine SLR's. Gait training. Aqua-therapy. Pelvic floor and core strengthening. Mini-lunges, sidestepping against resistance.

Week 8-10: Lunges, light plyometrics, resisted lateral walking. Begin jogging/running program.

Month 6-9: Return to sport assessment (isokinetic testing is 90% of unaffected side)

***Please direct questions to Dr. Deimel and his team at 814-454-2401.**