SPORTS MEDICINE ASSOCIATES
Any Athlete. Any Injury. Anytime.®

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HIP SCOPE LABRAL REPAIR

EXTENSION	EXTERNAL ROTATION	INTERNAL ROTATION	ABDUCTION	WEIGHT BEARING RESTRICTIONS
Avoid passive extension x 3 weeks	Avoid extreme ER x 3 weeks	No limitations	0-45 degrees by 2 weeks	Toe touch WB 2 weeks, progress to FB • 2 lbs max flat foot WB • 3 wks if older than 50 or ostetopenic bone DC crutches ~3wks, when gait is normal an pain free If significant microfracture: to touch WB 3-5 wks as instructed.
Stop shy of pinchy pain with all PROM NO straight leg raises in flexion.				

Phase I (ROM and initial strengthening)

If microfracture, HOLD activities in shaded boxes (✅) until 6wks in all phases

Date of Surgery:	Week	1	2	3	4	5	6
Stationary Bike up to 20 mins. ‣Well member for 1 to 4, progress per patient progress tolerance	Daily	✓	✓	✓	✓		
Passive ROM/Circumduction ‣ER limitation see above	Daily	✓	✓	✓	✓	✓	✓
Isometrics 2x/day ‣Quads, Hams, Glute max, Transverse abdominus (TA)	Daily	✓	✓				
Soft Tissue Work/Scar mobs	Daily	✓	✓				
Muscle Stretch ‣Quad, Adductor, HS	Daily	✓	✓				
Stomach Stretch ‣Lie flat on stomach up to 15 mins	Daily	✓	✓	✓	✓		
Quadruped Rocking ‣Ok with labral repair	Daily	✓	✓	✓	✓		
Prone Pendulum (IR/ER on stomach)				✓	✓	✓	✓
Standing Hip Abduction in IR					✓	✓	✓
Bridging Progression			✓	✓	✓	✓	✓
Start Phase II exercises if no microfracture			✅				
Start Phase II exercises if no microfracture					✅		

Cardio exercises on reverse side (start ~4 weeks)

Phase II (Stability)

Phase II: Stability	Week	3	4	5	6	7	8	10
D/C crutches; start at 3 wks ‣non-antalgic gait	Daily	✓	✓					
Prone Hip Extensions	5x wk	✓	✓	✓				
Prone Hamstring Curls	5x wk	✓	✓	✓				
Prone Pendulum (IR/ER on stomach)	5x wk	✓	✓	✓	✓			
Standing Hip Abduction in IR	5x wk		✓	✓	✓			
Pool Therapy	5x wk			✓	✓	✓	✓	✓
Bridging Progression	5x wk	✓	✓	✓	✓	✓		
1/3 Knee Bends * ‣2 legs	5x wk	**End of wk 3**	✓	☑	✓	✓		
Butt Back squat	5x wk		☑	☑	✓	✓	✓	
Start Phase III exercises if no microfracture			☑					

*Bridges can start around week 3 unless weight bear restriction (can start week 2 if needed)
*If Microfracture, hold 1/3 knee bend until wk 3-6 based on WB restrictions
*Start Phase II activities at 4wks post-op

Phase III (if microfracture hold all WB activities until wk 6)

Phase III: Functional Strengthening	Week	4	5	6	7	8	10	12	16
Leg Press	Daily	☑	☑	☑	✓	✓			
Single Leg Balance	3x wk		☑	☑	✓	✓	✓		
Box Step Up	3x wk			☑	✓	✓	✓		
Bosu	3x wk			☑	✓	✓	✓		
Lunges- forward 90	3x wk			☑	✓	✓	✓	✓	
Lateral Lunge	3x wk			☑	✓	✓	✓	✓	
Single Knee bends **- 1wk after start of lunges**	3x wk			☑	✓	✓	✓		
Lateral Walk **- With squat and band**				☑	✓	✓			
Agility- Diagonal lateral agility	3x wk				✓	✓	✓		
Side Planks	3x wk	☑	☑	☑		✓	✓	✓	✓
Prone Planks	3x wk	☑	☑	☑	✓	✓	✓	✓	✓
Single Leg Bridges	3x wk	☑	☑	☑	✓	✓	✓	✓	✓
Rotational Activities (if painfree)						✓	✓	✓	✓

Phase IV

Phase IV: Return to Activity/Sport	Week	16	20	24
Sport Specific Drills/Training		✓	✓	✓

*Typically 4-6 months to return to sports, 1yr for maximal recovery
*Microfracture can delay recovery 1-5 months

Start cardio at 4 weeks if glute strength is present, if microfracture, wait until 6 weeks.

Cardio/Functional Exercise-Skating/Running/ETC.

Cardio/Functinoal	Week	4	5	6	7	8	10	12	12-24
Stationary Bike with resistance	3x wk	✓	✓	✓					
Elliptical Machine	3x wk			✓	✓	✓	✓	✓	✓
Outdoor Biking (Resisted Biking)	3x wk				✓	✓	✓	✓	✓
Functional Activity (hike, kick, throw)	3x wk					✓	✓	✓	✓
Sport Specific Progressions	3x wk						✓	✓	✓

Excessive activity, including cardiovascular exercise may lead to the return of anterior hip pain if ample core and glute strength is not present.