

The affected leg is placed in a **custom-fitted hip orthosis that restricts hip flexion to a range of only 15° to 30°**. Limiting hip motion limits the stress at the reattachment site. The patient then ambulates on <u>crutches with toe-touch weight bearing</u>.

## STAGE 1: WEEKS 0-6:

- Brace at 15 to 30 degrees of hip flexion, toe-touch weight-bearing for 0-10 days
  - Gradual increase of 25% WB for the next 3 weeks
- At week 2, initiate passive ROM by ATC or PT
  - · Also instruct patient how to perform PROM exercises on their own
- · At week 4, initiate gentle active ROM
- Discontinue use of brace by week 6

## STAGE 2: WEEKS 6-10:

- Discontinue use of brace
- Full weight-bearing
- Introduce aquatherapy
- · Isotonic exercises with limited ROM, avoiding terminal ROM
- Initiate lumbo-pelvic stabilization exercises and closed chain exercises
- At 8 week, isotonic strength training is progressed and dynamic training is advanced

## STAGE 3: WEEKS 10-24

- · An isometric evaluation at 60 degrees of knee flexion is performed at 10 weeks
- Initiate dry land jogging
- A full isokinetic evaluation is performed at 60 degrees/second, 120 degrees/second, and 180 degrees/second and compared with results from the nonsurgical side
- · Sport-specific activities are continued

## STAGE 4: MONTHS 6-9:

- Return to sporting activity is permitted when isokinetic testing is 80% of the unaffected side (similar to the protocol for patients after anterior cruciate ligament reconstruction)
- Days 0-10 Brace at 15° to 30° hip flexion, Toe-Touch weight bearing
- Days 10-14 Advancement of 25% weight bearing over the next 3 weeks
- Week 2 PROM hip and knee
- Week 4 Gentle AROM
- Week 6 Discontinue brace, Full WB, normal gait training. Introduce aquatherapy. Isotonic exercises with limited ROM, avoiding terminal ROM. Initiate core pelvic strength training and closed-chain exercises
- Week 8 Isotonic strength training progressed, dynamic training is advanced.



- Week 10 Isometric strength evaluation at 60° of knee flexion. Initiation of dry land jogging. Full isokinetic evaluation is performed at 60°/s, 120°/s, and 180°/s and compared with results from the nonsurgical side. Continue sport-specific activities.
- Months 6-9 Return to sporting activities when isokinetic testing is 80% of unaffected side