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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