PHYSICAL THERAPY PRESCRIPTION



Dean Wang, M.D.

Orthopaedic Surgery and Sports Medicine Appointments: 714-456-7012 (Orange) || 949-515-5210 (Costa Mesa) Office: 714-456-7012 Fax: 714-456-8711 CA License: A124076

PATIENT STICKER

HIP ARTHROSCOPY TROCHANTERIC BURSECTOMY AND ITB RELEASE PROTOCOL

Surgical Date: _____

Side:
Right Left

Diagnosis: Hip Trochanteric Bursectomy and Iliotibial Band Release for Snapping Hip

Postop	<u>Goals</u>	Precautions	Exercises
Weeks 0-6 HEP daily	Full ROM Prevent quad inhibition Edema and pain control Promote independence	TTWB (20 lb) x 2 weeks, progress to FWB thereafter <u>CPM (4 hrs/day x 2 weeks)</u> Start 0-90°, advance 5-10° per day as tolerated Decrease to 3 hrs/day if stationary bike is used 20 min/day	PROM pain free as tolerated Supine hip rolling for IR/ER, stool rotations/prone rotations, stool stretch Hip isometrics in all directions Pelvic tilts, supine bridges NMES to quads with SAQ with pelvic tilt Glut/piriformis stretch Progress core strengthening (avoid hip flexor tendonitis) Step downs Clam shells Aquatic/pool therapy at week 4 (avoid breaststroke)
Weeks 6-12 HEP daily	Full ROM Normal gait pattern Normal patella mobility Improve ADL endurance	WBAT Avoid painful activities No running	Continue above exercises Lateral scar massage Elliptical Hip hiking, side stepping with theraband/treadmill Bilateral cable column rotations Bent knee fall outs Progress ROM – standing BAPS rotations, prone hip ER/IR, ER with FABER, hip flexor, glute/piriformis, and ITB stretching (manual and self) Progress strengthening – hip flexion isotonics, multi- hip machine, leg press, knee flex/ext isokinetics Progress with proprioception/balance
Weeks 12+ HEP daily	No apprehension with sport specific movements Maximize strength and flexibility to meet sporting demands	WBAT Avoid painful activities	Progress LE and core strengthening Endurance activities around the hip Dynamic balance activities Active release therapy Plyometrics Treadmill running program and sport specific agility drills
Frequency & Duration: 1-2 2-3 x/week for weeks Home Program Physician's Signature: M.D.			
Physician's Signature:M.D.			