



*Always First.*

**FOX VALLEY ORTHOPEDICS**  
**Arthroscopic Hip Surgery Post-Operative Protocol**  
**Dr. Vishal Mehta**

**Surgical Procedures:**

**Labral Repair** (also includes take-down of pincer lesion, which is followed by labral re-attachment)

**Microfracture**

**CAM lesion take-down**

For all phases, modalities prn: cryotherapy, Stim

**Phase 1: Weeks 1-2**

Labral repair: Toe-touch WB x 4 weeks, ROM- minimal ER and IR x 2 weeks, caution w/ flexion >100 for 10 days then no flexion limits. Don't push through pain

Microfracture: Toe-touch WB x 6 weeks, ROM- gentle ROM all directions, no joint loading. Don't push through pain

CAM take-down: same as labral repair

**Other Precautions:** No SLRs, No bridging, No capsular irritation

**Exercises:**

- Stationary bike no resistance, keep seat high enough to avoid excessive hip flexion
- open chain strengthening for knee extension, flexion, gastroc
- Gluteal sets, heel slides
- isometrics (transverse abs, hip abd/add)
- uninvolved knee to chest, piriformis stretching (minimize ER)
- passive supine hip roll

**Phase II: Weeks 3-4**

Labral Repair: Progress to FWB by week 4 (50% WB by 3 weeks), continue to progress ROM to full (no limits on ER/IR anymore), focus on non-antalgic gait pattern

Microfracture: Toe-touch WB x 6 weeks, Gentle mid-range loading ROM by 4 weeks

CAM take-down: same as labral repair

**For weight-bearing progression, important to restore normal gait and continue to use assistive device (crutches) until non-antalgic gait**

**Exercises:**

- add light resistance to stationary bike
- double leg bridging (may do band around knees)

- 3 way leg raises (abd, add, ext) and SLRs
- sidelying clams
- for labral repair and CAM take-down, may start gentle leg presses (end of week 4)

### **Phase III: Weeks 5-7**

Labral Repair: FWB, non-antalgic gait, should have full ROM

Microfracture: Progress to FWB at 6 weeks, should have full ROM

CAM take-down: same as labral repair

#### **Exercises:**

- double and single leg balance
- manual long axis distraction
- manual A/P mobilizations
- 4 way hip/ Multi Hip machine
- labral repair and CAM take-down:
  - gentle elliptical trainer
  - single leg balance (BOSU ball/dyna disc)
  - L1 steps ups/ lateral step downs
  - squats
  - lateral shuffles

### **Phase IV: Weeks 8+**

Labral repair: same as phase III

Microfracture: Full, end-range loading

CAM take-down: same as phase III

#### **Exercises:**

- lunges
- side to side/lateral agility
- sport-specific functional drills and plyometric progression (athletes)
- labral repair: jogging at 3 months
- microfracture: jogging at 4-5 months
- CAM take-down: jogging at 3-4 months

### **Other considerations:**

\*Typically requires 3 months of supervised PT

Month 1- Tissue Healing Phase (pain control, decrease tissue inflammation, decrease swelling, maintain motion)

Month 2- Early Functional Recovery (full ROM gained, early strength gains, avoid flexor and abductor tendonitis)

Month 3- Late Functional Recovery (advance strength, balance/proprio, monitor for tendonitis)