

Rehabilitation Protocol: Open Hip Abductor Repair (Gluteus Medius and Minimus)

Date of Surgery: _____

Repair: ☐ Gluteus Medius and Minimus Repair ☐ Augmentation

Augmentation: Progression may be slower depending on tissue quality. If so, specific changes to the timeline will be noted in the Comments section below.

Protect the Repair: No active hip abduction or passive hip adduction for 6 weeks; no hip adduction past neutral through 12 weeks. Watch for hip flexor tendinitis, trochanteric bursitis, and anterior knee pain. Some patients use a cane for endurance activities for up to a year.

Progression is both time- and criteria-based. Outcome measures: LEFS, NPRS. Please contact our office with any questions or concerns.

☐ **Phase I – Protection (Weeks 0–6)**

- **Weightbearing: 50% partial weightbearing with walker or crutches for 6 weeks**
- **Precautions: No active hip abduction; no passive hip adduction**
- **Home Safety/Education:** One home PT visit as directed: household hazards, raised toilet seat/shower chair, sitting posture, bed mobility, transfers, stairs; activity modification
- **Home Exercises**
 - Hooklying abdominal bracing, with glute sets
 - Quad sets; seated long arc quads
 - Ankle pumps, progressing to seated calf raises
 - Cryotherapy for edema and pain
- **Criteria to Progress:** Surgeon clearance at 6-week visit; tolerating 50% PWB; pain-free daily activities

☐ **Phase II – Early Strengthening (Weeks 7–12)**

- **Weightbearing: Week 7: 75%; week 8: WBAT.** Progress walker/crutches to cane with good gait mechanics before discharging device (may take 12+ weeks)
- **Precautions: No hip adduction past neutral;** gentle passive ER, IR, and abduction only; avoid premature progression of WB or activity; avoid hip flexor irritation
- **Range of Motion –** Passive hip ER, IR, abduction, flexion; quadruped rocking; hip flexor and gastrocnemius stretching
- **Therapeutic Exercises**
 - Prone glute sets, progressing to bridges
 - Abdominal strengthening: supine, then hooklying, then standing, with arm/leg movements; quadruped bracing with arm movements
 - Quad sets, progressing to short arc quads
 - **Week 8+:** Isometric hip abduction progression – bent knee fall-out, then short lever supine, then long lever supine
 - Closed chain as WB allows: standing hip PREs, mini squats, double leg press, calf raises
 - Balance: weight shifts, balance board, varying surfaces, single leg stance with lumbopelvic control
 - Stationary bike, UBE; aquatic therapy; scar and soft tissue mobilization
- **Criteria to Progress:** Normal gait; hip PROM normal (except adduction); pain-free daily activity; single leg stance 10 seconds without compensation; sit to stand without arms

☐ **Phase III – Strengthening (Weeks 13–24)**

- **Precautions:** Avoid premature progression of activity level and gym program; watch for gait deviations
- **Range of Motion** – Progress hip ROM to normal; hamstring and half-kneeling hip flexor stretching; foam rolling
- **Therapeutic Exercises**
 - Leg press (eccentric, single leg) and squat progressions
 - Side stepping, no resistance to resistance; step-downs and step-ups (4" to 8")
 - Single-leg cable column rotations, Pallof press
 - Core: quadruped progression; modified to standard front and side planks
 - Balance: single leg stance on varying surfaces with perturbations; rhythmic stabilization; LE PNF patterns
 - Bike, UBE; elliptical once good mechanics on a 6" step-up; PT-guided gym program; aquatic therapy
- **Criteria to Progress:** Full hip and lumbar ROM; symmetric squats; controlled 8" step-down; independent floor transfers

☐ **Phase IV – Return to Activity (Week 25+)**

- **Precautions:** Avoid premature progression of recreational activity
- **Therapeutic Exercises**
 - Advanced core and hip strength; static lunges as appropriate
 - Advanced endurance exercises
 - Sport-specific functional exercises as appropriate; aquatic therapy
- **Criteria for Discharge:** Pain-free daily and recreational activities; full hip ROM and flexibility; normalized functional movement patterns; physician clearance