

# Surgical hip dislocation

## Phase I: Protective Phase

Weeks 1-4

### Goals

- Control pain
- Neutralize muscle atrophy
- Promote healing of tissues

### Precautions

- Touch-down weight-bearing (20 to 30 pounds)
- Minimize active hip abduction
- Avoid hip adduction
- Hip flexion range of motion (ROM) limited to 0 to 90 degrees
- Hip abduction limited to 30 degrees
- Hip internal rotation (IR) and external rotation (ER) limited to neutral
- May use continuous passive motion (CPM) two hours on and off during the day

### Suggested exercises



Glute sets



Quad sets



Hamstring sets



Isometric hip adduction

### Other exercises to add:

- Ankle pumps
- Transverse abdominis activation
- Seated marching (within ROM limitations)

# Phase II: Early Mobilization Phase

Weeks 4-8

## Goals

- Increase ROM within tolerance
- Neutralize muscle atrophy
- Control pain

## Precautions

- Touch-down weight-bearing during Weeks 6-8 (physician discretion)
- Gentle ROM within tolerance
- Progress hip IR/ER within tolerance once patient is full weight-bearing (FWB)
- Avoid exercises with long lever arms, such as straight leg raises (SLR)
- Begin initiating hip abduction isotonic at Week 6

## Joint mobilizations



Long axis distraction



Inferior femoral glides

- Perform Grade III and IV joint mobilizations as needed to normalize ROM; long axis distraction may be performed for pain

## Suggested exercises



Supine hip abduction (Week 6)



Supine bridging



Standing hip abduction (Week 6)



Standing hip extension



Standing hip adduction



Standing hip flexion



Side-lying clams

**Other exercises to add:**

- Bike for cardio (no resistance)
- Prone or standing hamstring curls
- Isometric hip abduction

# Phase III: Progressive Strengthening Phase

Weeks 8-12

## Goals

- Normalize gait
- Increase muscle strength and symmetry

## Precautions

- Progress to FWB with physician clearance

## Suggested exercises



Prone hip extension



Side-lying hip abduction



Supine hip flexion



Single-leg bridging



Mini squats



Step-ups



Wall sits

### Other exercises to add:

- Side-lying hip adduction
- Single-leg stance
- Leg press
- Progress core stabilization
- Gradually add resistance to bike

# Phase IV: Functional Strengthening Phase

Weeks 12-20

## Goals

- Progressive functional strengthening

## Precautions

- Progress strengthening within pain tolerance

## Suggested exercises



Single-leg squat



Single-leg deadlift



Lunges

# Phase V: Return-to-Sport Phase

Week 20 and beyond

## Goals

- Improve cardiovascular endurance
- Sport-specific training

## Precautions

- Criteria to begin running progression:
  - Cleared by physician
  - Non-antalgic normalized gait pattern
  - Patient performs a single-leg squat with proper mechanics (no trendelenburg, dynamic genu valgum or lateral trunk lean)

## Suggested exercises

- Agility drills
- Plyometrics
- Sport-specific training
- Running progression

### Discharge criteria:

- Run with non-antalgic gait and no trendelenberg
- Cutting and agility drills performed with proper form and no hesitation on involved side
- Physician clearance