

# RUSSELL M. LAFRANCE MD

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## Gluteus Medius Repair Protocol

### Phase I - Post-op through 4 weeks

#### Goals:

- Protect integrity of the repaired tissue.
- Restore ROM within restrictions.
- Normalize gait pattern using 2 crutches 20% WB
- Prevent muscular inhibition.

#### Precautions:

- Limit hip flexion to 90 degrees for the first 6 weeks post-op then gradual progression as tolerated.
- **Maintain 20% WB for 6 weeks post-op with normal gait pattern.**
- No active hip ABD with gravity lessened until 4 weeks post-op (supine and standing).
- No active hip ABD against gravity (side-lying) until 8 weeks post-op.
- No resisted hip ABD until 10 weeks post-op.
- No passive IR with the hip flexed until 8 weeks.
- No single leg stance for 12 weeks.

#### Exercise program

- ankle pumps, quad sets, glut sets.
- Isometric hip Add bolster between knees.
- Glut sets.
- Heel slides.
- Supine hip IR/ER rolls with knee in full extension.
- partial sit up.
- Standing hip EXT, marching to 90 degrees no resistance.
- AROM long arc quad.
- PROM ER, ABD, EXT
- Hip flexor, hamstring, quad stretch

### Phase II 4 weeks post-op.

#### Goals:

- Restore functional ROM flexion, ABD, EXT, and ER.
- Increase strength.
- Normalize gait pattern.

### **Exercise program**

- Continue flexibility program.
- Core stabilization.
- Continue PROM and progress flexion beyond 90 at 6 weeks post-op.
- Gait training WBAT at 6 weeks post op wean from assistive device pain free no limp.
- Stationary bike minimal resistance and high seat (max 90 degrees hip flexion).
- Supine hip ABD slides.
- Standing hip ABD.
- Supine hip flexion SLR.

### **Phase III 8 weeks Post-op**

#### **Goals:**

- Restore cardiovascular endurance.
- Maximize strength, balance, proprioception.

#### **Exercise Program**

- Initiate closed chain exercise as tolerated.
- Sidelying hip ABD/ER “clams”.
- Sidelying hip ABD and prone hip EXT AROM.
- Bridge with tubing at knees.
- Prone resisted hip IR/ER.
- Standing hip IR with knee on stool.
- Standing hip ABD and EXT with theraband resistance standing on uninvolved LE at 10 weeks.
- Kneeling hip flexor stretch.
- Continue progressive strengthening.
- Side-step with theraband resistance.
- Stairmaster.

### **IV - Post op Week 12**

#### **Goals:**

- Optimize strength, balance, proprioception, and endurance

#### **Exercise Program**

- Initiate and progress single leg stance.
- Progress closed chain strengthening.
- 4 way hip with theraband resistance standing on involved LE.
- Continue core stabilization.
- Stairmaster.
- Lunges progressing to walking lunges.
- Aerobic stepping as tolerated at 10 weeks post-op.
- Aquajogging if available.

### **Phase V - Post-op Week 16**

Before beginning Phase V a 16 week functional test must be successfully completed (see attached).

#### **Exercise Program**

- Continue progressive hip strength and flexibility as above.
- Progression to a graduated running progression.
- Progression to a graduated double leg plyometric program uniplanar.

### **Phase VI - Post-op week 20**

Before beginning phase VI a 20 week functional test must be successfully completed. (see attached).

- Continue progressive strength and flexibility.
- Continue progressive running
- Progressive agility work.
- Progress plyometrics to double leg multiplanar and single leg uniplanar.
- Return to sport progression.

Discharge formal physical therapy. Continue gym program. Return to sport at approximately 6 months pending Physician release.