

Proximal Hamstring Repair Guidelines

Protocol: Chris Utz, MD

Progression is based on healing constraints and functional progression specific to the patient. Phases and time frames are designed to give a general sense of progression. Importantly, the repair must be protected for the first 6 weeks. Please do not hesitate to contact me with any questions or concerns.

<b>PHASE I: Generally 0 - 6 weeks post-op</b>	
<b>PHASE I GOALS:</b>	Protect surgical repair Restore ROM w/in guidelines Diminish pain and inflammation
<b>PRECAUTIONS:</b>	* <b>NO</b> hip flexion & <b>No</b> hamstring stretches for 6 weeks* *Must <b>ALWAYS</b> wear hip brace for 8 weeks, even while sleeping* * <b><u>Patient will be NWB for 6 -8 weeks per Dr. Utz's orders</u></b> *
<b>Brace:</b>	Brace must be worn except during rehabilitation for the first 6 weeks after surgery
<b>WOUND:</b>	Post-op dressing remains intact until post-op day #5 May begin showering after post-op day #5 (no need to cover incision site) * <b>Do NOT</b> submerge wound in tub or pool for 4 weeks* Suture/staple removal (if needed) @ 10-14 days per Ortho/PT Begin scar massage after incision site sloughs/scar is formed
<b>REHABILITATION:</b>	Frequent use of ice
~weeks 1-2	Begin passive calves, quads, & hip flexor stretches. Ankle pumps, gluteus squeezes, quad squeezes, gentle hip abduction w/ submax isometrics using a belt or Pilates ring, patella mobilizations. May do ankle & calf strengthening w/ hip at 0 of flexion & knee flexed
~weeks 3-4	Progress knee PROM to full extension. At week 4 – start prone quad strengthening, sidelying hip abd/add, lumbopelvic stabilization. Hip can flex to 45 if knee flexed to 90.
~weeks 5-6	Start PROM of hip 0-45. Cont above
<b>FOLLOW-UP:</b>	Physical Therapy: 2-3x weekly; Ortho: ~6-8 weeks post-op; Supervised rehabilitation: 1-2 x per week as needed
<b>DOCUMENTATION:</b>	Precautions, pain level, medications and modalities Observation: (incision sites) - Signs/symptoms of infection? Site healing well? Neurovascular status: Distal pulses, motor and sensation intact?

**PHASE II: Generally 6-12 weeks post-op**

**PHASE II GOALS:** Progress Weight bearing & restore normal gait pattern  
Protect repaired tissue  
Restore hip ROM – ROM must come before strengthening  
Progressive strengthening of hip, pelvis, & LE's

**PRECAUTIONS:** \*May discontinue brace use\*  
\***NO** forced (aggressive) stretching of hip muscles or hamstrings\*  
\*Avoid terminal ranges of motion in exercises\*

**REHABILITATION:** Continue phase I exercises as needed  
Progress to the following exercises and increase intensity gradually when patient is ready  
(i.e., no increase in hip pain or stiffness since the previous exercise session)  
\*Note: all strengthening should be done, starting with low weights, high repetitions, and in  
a painless ROM\*

**~weeks 6-7** Progress to FWB; progress hip ROM to 90 degrees; may do stationary bike once get 90  
Supine SLR; gait training; pelvic floor & core strengthening; may begin isotonic exercises  
with limited ROM; closed chain exercises initiated; Begin WB exercises (mini lunges, side  
stepping w/ resistance, mini squats, etc) once FROM achieved

**~weeks 8-10** Cont isotonic strength training  
Isokinetic work & dynamic stretching may start

**~weeks 10-12** Lunges, May start elliptical trainer, light plyometrics  
Progress to agility drills

**FOLLOW-UP:** Physical Therapy; Ortho: ~3 months post-op;  
Supervised rehabilitation: 2-3 x per week as needed

**DOCUMENTATION:** Pain level, medications, modalities  
Hip ROM & strength

**PHASE III: Generally 3-6 months post-op**

**PHASE III GOALS:** Restoration of full muscular strength & endurance  
Sport specific training

**PRECAUTIONS:** \***NO** participation in contact/collision sports until 6 months post-op minimum\*  
\*No forced stretching

**REHABILITATION:** Continue phase II exercises as needed  
Progress to the following exercises and increase intensity gradually when patient is ready  
(i.e., no increase in hip pain or stiffness since the previous exercise session)  
\*Note: all strengthening should be done, starting with low weights, high repetitions, and  
in a painless ROM\*

**~weeks 17-20** May start running program; continue strengthening exercises & progress  
Sport specific drills  
Z cuts, W cuts, Cariocas  
Advance agility drills  
Plyometrics

**FOLLOW-UP:** PT: Monthly; Ortho: ~6 months post-op;  
Supervised rehabilitation: 1-2 x per week as needed

**DOCUMENTATION:** Pain level - medications and modalities  
Hip ROM & strength  
Biodex testing at 6 months post-op

**MISCELLANEOUS:** Return to sporting activities is allowed when isokinetic testing is 80% of the unaffected side. This is typically between 6-9 months.