Total Hip Arthroplasty- Anterior approach Garrett C. Davis, M.D.

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ROSENBERG COOLEY METCALF

THE ORTHOPEDIC CLINIC AT PARK CITY

Over all Rehab Precautions:

- Progress Gait Training with LRAD (least restrictive assistive device) Per Patient's tolerance
- No immersion of the incision in water for 4-6 weeks post-op, *Showers Only*
 - No swimming, hot tubing, baths, etc.
- No ROM Precautions

Phase I: <u>Hospital PT, Preparing for discharge (0-3 days post-op)</u>

- Gait Training Walking with assistive devices
- Activities of Daily Living

Phase II: Early ROM, Strengthen, and Gait Training:

Weeks 0-2:

- ROM Exercises (PROM, AAROM<AROM)
- Flexibility Exercises
- Quadriceps Exercises—quad sets & recruitment techniques
- Gait Training

Weeks 3-6:

- Scar Management--mobilizations
- ROM Considerations—ensure full knee ROM
- Hamstring Strengthening—open chain kinetic strengthening
- Quadriceps Strengthening—progressive open and closed chain kinetic strengthening
- Proprioception Exercises
- Hip Abduction and Adduction,
- Core Strengthening

Phase III: Master Functional Activities, Improve Strength and Normalize Gait Pattern:

Week 7-12:

- Continue Strengthening Activities—no limitations
- Gait Training—aggressive correction of any remaining gait abnormalities
- Start Sp Week 7-12:
- Continue Strengthening Activities—no limitations
- Gait Training—aggressive correction of any remaining gait abnormalities
- Start Sport or Activity Specific Strength Training
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Phase IV: Approximate Muscular Strength and Return to Sport Specific Activities:

Weeks 13-16:

- Intense lower extremity weight training program
- Institute aggressive sport specific training program (if indicated
- CRITERIA TO BEGIN GOLF/TENNIS/SKIING or OTHER ACTIVITIES:
 - Full knee ROM
 - o Painless Full Hip ROM
 - Normal Gait with no Limp