

Total Hip Arthroplasty Protocol: Dr. Lawrence

Patients will perform a HEP from the time of hospital discharge to their 2-week follow-up appointment in orthopedics. The patient will then be referred with an evaluation and treat order to start Outpatient Physical Therapy. A typical frequency of Physical Therapy at 2 weeks is 1 time per week until their 6-week follow-up visit with orthopedics. However, frequency can be increased or decreased depending on patient progress.

Phase 1: (2 to 6 weeks post-op)

Issues requiring an orthopedic consult:

- Severe pain with initial weight bearing from a non-weight bearing position located in the groin or anterior thigh (i.e., signs of stem pistoning)
- Non-compliance with hip precautions
- Wound complications: non-healing or signs of infection
- Mechanical symptoms (clicking, popping, shifting, end of stem pain)

Weight bearing restrictions: WBAT

Range of Motion Restrictions:

- No A/AA/PROM hip flexion > 90 °
- No A/AA/PROM hip IR > neutral
- No A/AA/PROM hip adduction > neutral
- No hip ER with the hip extended

Activity Restrictions:

- No combined trunk flexion and Hip IR
- No driving until pain medications have been discontinued and the patient has enough strength to slam on the brakes.
- No lifting or carrying > 25# until 3 months post-op

Goals:

- Minimize pain
- Normalize gait without an assistive device
- Improve hip flexion, extension, external rotation, and abduction to protocol limits
- Independence with ADL's

Treatment Guidelines:

- Progress HEP as tolerated
- Gait training
- Retro treadmill (to facilitate hip extension, normalize step length)
- Proximal hip strengthening (i.e., clamshell with a pillow; standing hip abduction and extension; calf strengthening)
- Forward step-up progression (4 inch → 6 inch → 8 inch)
- Forward step downs
- Proprioception / balance training (Bilateral dynamic to unilateral static stance)

Phase 2: (6-12 weeks post-op)

Issues requiring an orthopedic consult:

- Severe pain with initial weight bearing from a non-weight bearing position located in the groin or anterior thigh (i.e., signs of stem pistoning)
- Lateral hip pain associated with trochanteric bursitis
- Wound complications: non-healing or signs of infection
- Mechanical symptoms (clicking, popping, shifting, end of stem pain)

Weight bearing restrictions: WBAT

Range of Motion Restrictions:

- **No combined hip flexion and hip internal rotation**
- **Hip flexion is permitted > 90 ° while sitting or standing as long as the patient is flexing forward between their legs with their legs apart.**

Activity Restrictions:

- No combined trunk flexion and Hip IR – LIFETIME restrictions.
- No combined hip flexion / hip adduction (crossing the legs at the thighs)
- No lifting or carrying > 25# until 3 months post-op

Goals:

- Ascend / Descend stairs reciprocally
- Normalize gait without an assistive device
- Independence with Functional activities

Treatment Guidelines:

- Treadmill, Elliptical, Nu Step, Stationary bike
- CKC LE strengthening
- Hip flexion ROM in sitting or supine beyond 90 degrees with the hip abducted
- Proximal hip strengthening / Abdominal PRE's
- Leg Press 0 - 90° (no more than bodyweight resistance)
- Forward step up with hand weights to simulate carrying loads
- Lateral step downs / Step Ups
- Proprioception / balance training progression

Activities allowed at 6 weeks post-op: Treadmill, Elliptical, Nu-Step, Stationary Bike, Biking on level ground, Golf Ball Chipping (4-6 weeks), Climbing farm tractor / lawn tractor steps, Climbing ladders, Hunting, Walking in the woods, Fishing, Transferring into a boat. Please contact Dr. Lawrence regarding any other activities.

Activities allowed at 3 months post-op: Full Golf Swing, Road Bike, Martial Arts, Skiing, Rowing, Leg Press > 90° of Hip flexion, Hauling / Pulling Loads, Canoeing, Carrying > 25# loads. Please contact Dr. Lawrence regarding any other activities.

Prohibited Activities for a Lifetime: Running / Jogging, Racquetball, Plyometrics and Jumping

Constrained Liner Extra Instruction: Do not push past first end feel in any direction.

Update: 4/14/21