

Hip Arthroscopy Protocol UCLH

	WB	Brace	ROM	Exercise	Precaution
Phase 1 0 – 2 W	WBAT Crutches Working to FWB wean crutches by 10-14d	No brace reqd	Ext work to full Hyper E (R=L) gentle F (can use X bike)	Q SLR C raises or theraband Hip E standing open chain Flexion Gentle prone Glutes squeeze	Caution with F overpressure Wounds clean dry covered
Phase 2 2 -- 6 W	FWB No Crutches		Full E / hyper E Full F Full AB gentle	Q closed chain mini Sq 2L to lunge to SLSq+leg press ensure glute and rotation control Gait reeducation C raise 2L Glute med work open chain Hip Flexors – gentle control (stabilizers) Hamstrings prone Proprioception Pool Hydrotherapy – no breast stroke and straight leg kick (wounds closed) scar massage Clear AND – Fem N Slump to ease hip flexors Stretches and STMassage – ITB Q HS / hip rots	No F overpressure Avoid work into full F or IR Avoid impact Return to work graded as increase pain + swell
Phase 3 6 – 12 W	FWB Normal gait pattern	No Brace	Gain Full Pain free	Q closed chain S L Sq + leg press single leg progress (Fnot beyond 90 d hip F) HS resisted X bike – seat high no clips Cross trainer / stepper / inclined treadmill walk Proprioception AND - FNS Stretches and STMassage – ITB Q HS / hip rots	No running until 3- 4 months post op Phased increases in gym loads Control swelling
Phase 4 12W - 6M	FWB	No Brace		Q continue leg press progress Agility walk through only Stretches and STMassage – ITB Q HS / hip rots Phased return to sports	Commence jogging only if No pain / and full Strength R=L / preparation work done on leg press/ X trainer
Phase 5 6M - 9M				Running pace up distances Agility run through gently sport specific drills and returned to training when ready Phased return to sport Training paced increases in time if all well paced return to Games – _, Half, _, full	Running Paced Return Caution as many chondral problems do not tolerate running / impact return to training , low impact , non contact initially Phased increase in contact

NB

This is guide only and will be modified per surgeon's post op orders and pts progress
Will be modified with concomitant Sx – ie Chondral surgery or diagnoses such as AVN