



Hip Replacement Protocol

Timeline: The focus of the first month after surgery is allowing the hip to heal and to walk with the use of crutches or a walker. Patients will begin working with a therapist 4 weeks after surgery. Total hip precautions must be maintained at all times – no hip flexion beyond 90 degrees and no internal rotation or adduction across the midline. Additionally, avoid hip extension and external rotation. Hip extension which occurs with normal walking is allowed, otherwise avoid hip extension exercise.

Stage I (Weeks 5-8 from surgery):

- Weight bearing as tolerated
- Edema control therapy (ice, compression sleeve)
- Active ROM exercises – add light resistance as able (bands, manual resistance)
 - Hip flexion to 90 degrees or less
 - Hip abduction exercise as tolerated
 - Adduction only to neutral position – no adduction across midline
 - No active extension exercise
- Straight Leg Raises / Quad sets
- Quadriceps, Hamstring, Adductor stretching
- Gait training with & without assistive devices as able
- Core strengthening exercise
- Progress cardiovascular therapy
 - Exercise bicycle at week 6 post op – no hip flexion beyond 90 degrees
 - Treadmill / elliptical if good quad control at week 6

Stage II (Weeks 9-12 from surgery):

- Emphasize active muscle strengthening (quad, hamstring, hip, core):
 - Isometric, concentric, eccentric
 - Add resistance as able (bands, manual resistance)
 - May add resisted hip extension exercise only to neutral position
 - Start with leg positioned anteriorly
 - Then can extend leg against resistance until leg is under body
 - Must adhere to total hip precautions
- Treadmill / bike / elliptical as able
- Lower extremity stretching
 - Hamstring, quad, Achilles flexibility
- Continue gait training and balance exercise
- Progress aerobic conditioning and endurance as able
- Progress core strengthening
- Begin functional movement exercise