



Abductor Repair (Gluteus Medius/Minimus Repair)

This protocol should be used as a guideline for progression and should be tailored to the needs of the individual patient.

- Strict protective weight bearing status for 8 weeks
 - Allow to place weight of leg on ground (neutralizes joint reaction forces)
- Emphasis on range of motion
 - Active assisted (hip flexion)/passive motion (hip abduction)
 - Avoid stress to repair site by avoiding passive adduction, ER/IR for 4 weeks
- No active abduction for 2 months to allow healing
- Pool program to initiate functional exercises in reduced weight environment
- Soft tissue mobilizations as needed
- Emphasis on cycling for range of motion without resistance (as long as this is tolerated by the patient)
- At 2 months, transition to full weight bearing (transition variable)
- Minimum 3 months before progression of functional activities as tolerated
- The rehab progression may be advanced or slowed by 1-2 weeks based on the quality of the repair and the security of the fixation

PHASE 1:

WEEK 1

Initial Exercises (*Weeks 1-3*)



Seated knee extensions



Ankle pumps



PHASE 1:

WEEK 1

Initial Exercises (*Weeks 1-3*)



Glut sets



Adductor isometrics



Quad sets



Heel slides, active-assisted range of motion



Hamstring sets



Pelvic tilt



PHASE 1:

WEEK 1

Initial Exercises (*Weeks 1-3*)



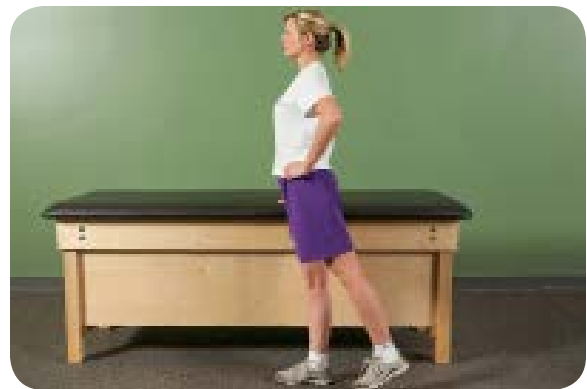
Prone on elbows



Prone knee flexion



Standing flexion without resistance



Standing extension without resistance



Pain dominant hip mobilization – grades I, II
(used only when hip joint has been affected)

Other Exercises Week 1

- Upper body ergometer, upper body strengthening
- Passive ROM: hip abduction



PHASE 1:

WEEK 2

Initial Exercises (*Weeks 1-3*)



Supine marching, modified dead bug



Superman



Theraband resistance on affected side – Flexion (start very low resistance)



Theraband resistance on affected side – Extension (start very low resistance)



Hip flexion, IR/ER in pain-free range

Other Exercises Week 2

- Standard stationary bike without resistance at 3 days postop (10 min if tolerated)
- Pool water exercises – water walking, range of motion (no active abduction or adduction), march steps, backward walking, mini-squats, heel raises, hamstring and hip flexor stretches



PHASE 1:

WEEK 2

Initial Exercises (*Weeks 1-3*)



Leg raise – Extension



Seated physioball progression – active hip/knee

Other Exercises Week 3

- Active range of motion with gradual end range stretch within tolerance (flexion)
- Continued PROM into abduction/adduction

Criteria for progression to Phase 2

- ☐ Minimal pain with phase 1 exercises
- ☐ Minimal range of motion limitations
- ☐ Demonstrates restricted weight bearing during gait

Goals of Phase 1

- ☐ Protect integrity of healing repair
- ☐ Restore range of motion within patient tolerance
- ☐ Diminish pain and inflammation
- ☐ Prevent muscular inhibition
- ☐ Normalize gait using two crutches with strict protective weight bearing of no more than the weight of the leg



PHASE 2:

WEEKS 4-6

Intermediate Exercises (*Weeks 4-6*)



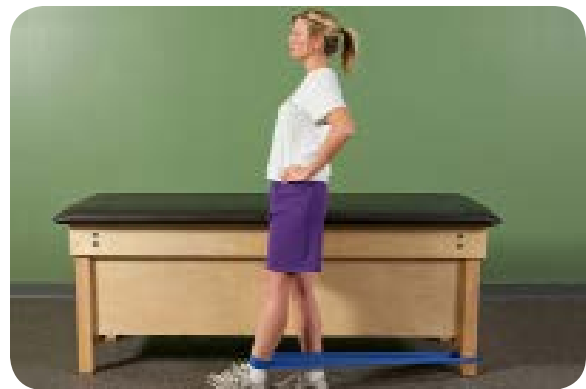
Crunches



Double leg bridges



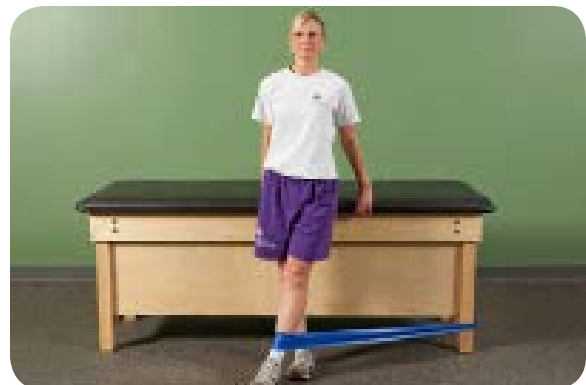
Theraband resistance on affected side –
Extension (start very low resistance)



Theraband resistance on affected side –
Flexion (start very low resistance)



Standing adduction without resistance



Theraband resistance on affected side –
Adduction (start very low resistance)



PHASE 2:

WEEKS 4-6

Intermediate Exercises (*Weeks 4-6*)

Other Exercises Weeks 4-6

- Pool water exercises – flutterkick swimming, 4-way hip with water weights, step-ups
- Add PROM IR/ER and adduction

Goals of Phase 2

- Protect integrity of healing tissue
- Restore pain-free range of motion
- Progressively increase muscle strength and endurance
- Continue to respect weight bearing precautions

Criteria for progression to Phase 3

- Minimum pain with phase 2 exercises

PHASE 3:

WEEKS 7-10

Advanced Exercises (*Weeks 7-10*)

Exercises Week 7

- Standing theraband/pulley flexion and extension or multi-hip
- Pool water exercises– flutterkick, swimming, 4-way hip with water weights, step-ups



PHASE 1:

WEEK 8

Advanced Exercises (*Weeks 7-8*)



Log rolling



Standing heel lifts



Superman (quadruped position)



Abduction isometrics

Other Exercises Week 8

- Gradually wean off crutches
- Wall mini-squats
- Physioball mini-squats with cocontraction
- Leg Press (minimal resistance, gradually increasing resistance to patient tolerance)
- Initiate AROM abduction (Supine)
- Hip mobilizations as needed



PHASE 2:

WEEK 9

Intermediate Exercises (*Weeks 4-6*)



Single leg bridges/stabilization/alternate kickouts



¼ Mini squats



Standing abduction without resistance



Clamshells

Other Exercises Week 9

- Knee extensions, hamstring curls
- Single stability ball bridges
- Initiate elliptical machine
- Add seated IR/ER AROM in pain-free range



PHASE 3:

WEEK 10

Advanced Exercises (*Weeks 7-10*)



Theraband resistance on affected side – Abduction
(start very low resistance)



Single leg balance – firm to soft surface with external
perturbation (ball catch, sports specific/ simulated ex.)



Leg raise – Abduction



Physioball hamstring exercises – hip lift, bent knee
hip lift, curls, balance



Bosu squats



PHASE 3:

WEEK 10

Advanced Exercises (*Weeks 7-8*)



Theraband resistance on affected side - Abduction
(start very low resistance)



Clamshells with resistive tubing/band

Goals for Phase 3

- ❑ Restoration of muscular endurance/
strength
- ❑ Restoration of cardiovascular endurance
- ❑ Optimize neuromuscular control/balance/
proprioception
- ❑ Restore 60-70% gluteus medius strength

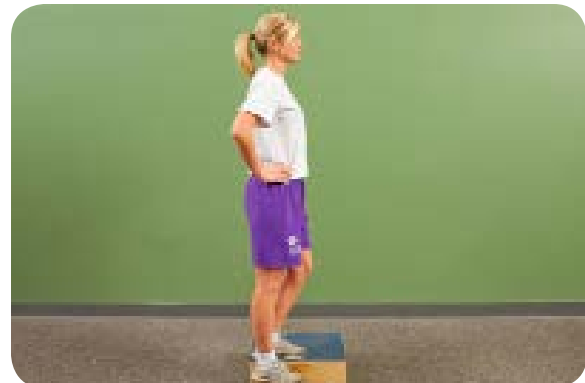
PHASE 4:

WEEKS 11-15

Sports specific training rehab clinic based progression



Single leg pick-ups, add soft surface



Step-ups with eccentric lowering



PHASE 4:

WEEKS 11-15

Sports specific training rehab clinic based progression



Theraband walking patterns – forward, sidestepping, carioca, monster steps, backward, ½ circles forward/backward – 25 yds. Start band at knee height and progress to ankle height



Sidestepping with resistance (pause on affected limb), sports cord walking forward and backward (pause on affected limb)



Side steps over cups/hurdles (with ball toss and external sports cord resistance), increase speed



Single leg body weight squats, increase external resistance, stand on soft surface



Lunges progress from single plane to tri-planar lunges, add medicine balls for resistance and rotation

Other Exercises Weeks 11-15

- All phase 3 exercises

Goals for Phase 4

- ❑ Single leg mini-squat with level pelvis
- ❑ Cardiovascular fitness equal to preinjury level
- ❑ Demonstration of initial agility drills with proper body mechanics



FINAL PHASE:

WEEKS 16 & BEYOND

Sports specific training on field or court

Other Exercises Weeks 16 & beyond

- Running progression
- Sport specific drills
- Traditional weight training
- Pool running (progress from chest deep to waist deep), treadmill jogging
- Step drills, quick feet step-ups (4-6 inch box) forward, lateral, carioca
- Plyometrics, double leg and single leg shuttle jumps

Criteria for full return to competition

- Full range of motion
- Hip strength equal to uninvolved side, single leg pick-up with level pelvis
- Ability to perform sport-specific drills at full speed without pain
- Completion of functional sports test
- Restore full gluteus medius strength before higher level activities are added