

HIP OPEN BURSECTOMY WITH ILIOTIBIAL BAND WINDOWING

# Physical Therapy, Strength and Conditioning

# PHASE I: PROGRESSIVE STRETCHING AND EARLY STRENGTHENING (WEEKS 0 TO 4)

#### Goals

- Begin WBAT as tolerated with goal to wean off crutches (up to 1 week)
- Normal gait
- Normal single limb stance
- Improving ROM
- Improve LE activation, strength and endurance work

#### **Manual Therapy**

- Scar mobilization @ 3 weeks: 2 times per day: May use Vit E or other lotion as desired
- STM to quad, ITB, hip flexors, glutes, hip adductors/abductors/rotators
- Continue work on ROM as tolerated (flexion, abduction, IR, ER)
- Lower extremity stretching program (avoid ITB and piriformis)

#### **Exercise Progression (as tolerated)**

- Stationary bike with no resistance: Immediately as tolerated
- Glute, quadriceps, hamstring isometrics (2x/day): Immediately as tolerated
- Bridging double and single
- Supine dead bug series
- Core 6 program
- Quadruped hip extension series
- Standing open and closed chain multi-plane hip
- Step-up progression
- Squat progression
- Heel raises
- Stationary biking
- Single limb stance progression

# Criteria for Progression to Phase 2

- Flexion, ER and IR ROM within normal limits
- Normal Gait
- No Trendelenberg with Single Leg Stance/descending stairs
- Normal bilateral squat

#### PHASE II: ADVANCED STRENGTHENING AND ENDURANCE TRAINING (WEEKS 4 TO 8)

# **Manual Therapy**

- Continue soft tissue mobilization as needed particularly glutes, adductors, hip flexors, abductors
- Gentle joint mobilizations as needed for patients lacking ER or FABER ROM
- May begin trigger point dry needling for glutes, quads, adductors, hip flexors
- Assess FMA and begin to address movement dysfunctions

# **Exercise Progression**

- Sidelying hip abduction
- Standing internal/external rotation strengthening (use stool)
- Continue with muscle activation series (quadruped or straight leg series)
- Introduce movement series to increase proprioception, balance, and functional flexibility
- Progress core program as appropriate
- Advanced glute and posterior chain strengthening
- Leg press and leg curl
- Squat progression (double to single leg—add load as tolerated)
- Lunge progression
- Step-up Progression
- Walking program
- May begin Deep water pool walking at 4 weeks if incisions closed, flutter/dolphin kick at 6 weeks
- Outdoor biking—discuss with surgeon and PT
- Implement full LE stretching program as tolerated