

## POSTERIOR TOTAL HIP ARTHROPLASTY & TOTAL HIP REVISION

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Patient \_\_\_\_\_

DOS \_\_\_\_\_

ACUTE CARE STAY	OUT-PATIENT THERAPY			NOTES:
<p><b>Week 0</b> Ankle Pumps, Quad Sets Gluteal Sets, Heel slides</p> <p>ROM restrictions: 90° Flexion Avoid Internal Rotation with Flexion 10° Adduction</p> <p>Bed mobility: May sleep on uninvolved side with pillow in between their knees. No prone sleeping for 3 months.</p> <p>WBAT with assistive device. unless modified my MD.</p> <p>Stairs</p> <p>ADL's: toilet seat riser, reacher, sock aid, long shoe horn. <b>Avoid</b> low chairs or any other repetitive activity that would stress the gluteus.</p>	<p><b>1-3 weeks post-operative</b></p> <p>Continue post-op exercises</p> <p>AROM-supine, sliding with assist to encourage ROM within restrictions</p> <p>Long Arc Quad</p> <p>Adductor and Abductor Isometric</p> <p>Trunk stabilization/Bridging</p> <p>Standing</p> <ul style="list-style-type: none"> <li>- Hip Abduction</li> <li>- Hip Extension</li> <li>- Hip Flexion</li> </ul> <p>Bike, high seat</p> <p>Heel raises</p> <p>Gait training: Walker or crutches until safe and comfortable to go to cane</p>	<p><b>4-6 weeks post-operative</b></p> <p>Continue stretches</p> <p>Continue strengthening</p> <p>Progress to: Hip Abduction strengthening: active, isometric, isotonic, side lying</p> <p>Sub-max isotonics with 1-5 pounds</p> <p>Clamshell</p> <p>Balance-double leg to single leg</p> <p>Total Gym</p> <p>Walking activation</p> <ul style="list-style-type: none"> <li>- March</li> <li>- Sidestep</li> <li>- Backwards</li> </ul> <p>Bike</p> <p>Gait training-cane</p>	<p><b>7-12 weeks post-operative</b></p> <p>Progress ROM within restrictions and strength to WNL or equal to opposite extremity</p> <p>Progress strengthening of Quad and Hip groups</p> <p>Total gym with single leg</p> <p>Mini-squats</p> <p>Wall sits</p> <p>Step-ups forward and lateral</p> <p>Balance</p> <p>Treadmill walking forward and backward</p> <p>Walking without a limp</p> <p>D/C cane when walking without a limp</p> <p>Address work and recreational functional activity demands.</p>	<p>Gluteus maximus should be protected for <b>6 weeks</b>. This muscle is detached and reattached during surgery. Avoid repetitive deep squatting activities for this time.</p> <p>Progress to functional program as tolerated. Prepare for back to work, and recreational activities.</p> <p>This protocol should be interpreted as a continuum. If a patient is progressing ahead of the time schedules, advance them as tolerated.</p>
<p>Any Questions? Please contact: <b>Northwoods Therapy Associates</b> Altoona, WI    Chippewa Falls, WI (715) 839-9266    (715) 723-5060</p>				
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