

PT PROTOCOL

Endoscopic Ischiofemoral Decompression

Rehabilitation Protocol

Weight-Bearing Status

ONLY IF DIFFERENT FROM PROTOCOL BELOW

Weight-bearing status may be modified if a concomitant intra-articular hip procedure (e.g., labral repair, femoroplasty) was performed. Follow the weight-bearing status in the phases below unless a different status is indicated here.

- ☐ Non-weight-bearing ☐ Toe-touch / partial weight-bearing ☐ Weight-bearing as tolerated

Brace / precautions: _____

1

Weeks 0-2

Foot-flat WB with crutches; normalize gait; gentle ROM

2

2-6 Weeks

WBAT, discontinue crutches; gentle abductor work at wk 3, hip flexor loading held to wk 6

3

6-12 Weeks

Initiate hip flexor strengthening; LE/core, plyometrics, treadmill running when cleared

Milestones above are goals, not guarantees; progression is criterion-based.

Phase 1 Weeks 0-2

Weight-Bearing: Foot-flat weight-bearing, approximately 20 lbs, with crutches. Normalize gait pattern with crutches.

Range of Motion

- Gentle range of motion.

Phase 2 Weeks 2-6

Weight-Bearing: As tolerated; discontinue crutches.

Range of Motion

- Progress range of motion.

Therapeutic Exercises

- Avoid hip flexor strengthening until 6 weeks postoperative.
- Gentle hip abductor/gluteal strengthening and active-assisted range of motion may begin at week 3, per the published literature.

Phase 3 Weeks 6-12

Weight-Bearing: As tolerated.

Therapeutic Exercises

- Initiate hip flexor strengthening.
- Progressive lower-extremity and core strengthening.
- Plyometrics.
- Treadmill running program when cleared by the surgeon.
- Sport-specific agility drills.