

Postoperative Rehabilitation Protocol for Gluteus Medius / Minimus Repair

**Physical Therapy should be started within a week after surgery*

Phase 1: Postoperative weeks 0-2

- Goals
 - Protect repair
 - Emphasis on compliance to home exercise program and weight bearing precautions
- Precautions / Restrictions
 - Weight bearing
 - 25% partial weight-bearing with crutches
 - Gait/Crutch training if needed
 - Brace
 - As indicated based on severity of tear
- Range of Motion
 - Gentle PROM
 - Hip Flexion to 90 degrees
 - Hip abduction as tolerated
 - Hip extension to neutral
 - **NO** passive hip adduction, ER, or IR
 - **NO** active hip abduction or IR
- Strengthening
 - Upright stationary bike with no resistance – push pedal with nonoperative leg
 - Joint mobilization
 - Soft tissue mobilization
 - Hip isometrics in extension and adduction
 - Quad sets, hamstring sets
 - Lower abdominal activation
- Modalities PRN

Phase 2: Postoperative weeks 2-6

- Goals
 - Control pain and inflammation
- Precautions / Restrictions
 - 50% weight-bearing with crutches
 - Advance weight bearing gradually with goal to wean off crutches at week 6-8
- Range of Motion
 - Slowly advance ROM as tolerated
 - Active-assisted hip abduction & IR
 - PROM ER / IR and adduction to neutral
 - AROM hip flexion
- Strengthening

- Progress Phase 1 exercises as appropriate
- Progress to isometric resistance
- Quad/hamstring isotonic exercises
- Supine bridges
- Prone hip extension
- Include stretching
 - Manual hip flexor stretching
 - Modified Thomas position

Phase 3: Postoperative weeks 6-12

- Goals
 - Normalize gait, work on symmetry
 - Advance ROM
 - Continue pain and inflammation control
- Precautions / Restrictions
 - Weight bearing as tolerated (wean by week 8 if not yet done)
- Range of Motion
 - Progress PROM as tolerated
 - Star active hip abduction and IR
- Strengthening
 - Progress lower extremity and core strengthening as tolerated
 - Eccentric step downs
 - Lateral walks, side stepping (no bands)
 - Balance and proprioception – start bilaterally
 - Continue stretching: manual and self-directed
 - Hip flexor, adductor, glutes, piriformis, IT band, TFL

Phase 4: Postoperative weeks 12+

- Goals
 - Work towards normalizing gait
 - Return to normal ADLs and prior level of function
- Range of Motion
 - Progress to full active ROM
 - Resisted abduction and IR
- Strengthening
 - Gradually progress strengthening of hip abductors/adductions
 - Continue to advance LE strengthening and flexibility
 - Advance core stability and strength
 - Lunges
 - Plyometrics
 - Balance and proprioception to single leg as tolerated