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HAMSTRING TENDON REPAIR

REHABILITATION PROTOCOL

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|  | **Weight Bearing** | **Brace/ROM** | **Goals** | **Exercises** |
| **Phase 1**  (0-6 weeks)  “Protect the repair” | No weight bearing (wk 0-2)  Toe touch (wk 2-6)  Crutches at all times  Avoid unsafe surfaces and environments | Brace locked at 45 degrees (prevent hamstring tension) (0-4 wks)  After 4 weeks - unlock hinged knee brace to 30 degrees flexion for several days, then 0 degrees  flexion/extension  Avoid hip flexion coupled with knee extension (hamstring stretch) | Protect the repair  Prevent blood clots  Pain control | Quad sets  Ankle pumps  Abdominal isometrics  Passive knee range of motion (ROM) with no hip flexion during knee extension |
| **Phase 2**  (6-12 weeks)  “Restore Motion and Gait” | Progress weight bearing as tolerated with weaning from crutches  No impact or running | Wean brace completely  Avoid dynamic stretching  Avoid loading the hip at deep flexion angles | Restore full knee motion  Begin early gentle strengthening  Normalize gait | Non-impact balance and proprioceptive drills – beginning with double leg and gradually progressing to  single leg  Stationary bike  Gait training  Begin hamstring strengthening – start by avoidance of lengthened hamstring position (hip flexion  combined with knee extension) by working hip extension and knee flexion moments separately; begin with isometric and concentric strengthening with hamstring sets, heel slides, double leg bridge, standing leg extensions, and physioball curls  Hip and core strengthening |
| **Phase 3**  (12-18 weeks)  “Restore Strength” | Full | No restrictions | No pain during strength training  Post-activity soreness should resolve within 24 hours | Continue hamstring strengthening – progress toward strengthening in lengthened hamstring positions;  begin to incorporate eccentric strengthening with single leg forward leans, single leg bridge lowering, prone foot catches, and assisted Nordic curls  Hip and core strengthening  Impact control exercises beginning 2 feet to 2 feet, progressing from 1 foot to the other and then 1 foot to  same foot  Cardiovascular Exercise: Biking, elliptical machine, Stairmaster, swimming, and deep water running |
| **Phase 3**  (12-18 weeks)  “Return to Activity” | Full | No restrictions | Dynamic neuromuscular control with multi-plane activities at low to medium velocity without pain or  swelling | Movement control exercise beginning with low velocity, single plane activities and progressing to higher  velocity, multi-plane activities  Sport/work specific balance and proprioceptive drills |

\*\* Typically, we will not have patients start formal PT until 4-6 weeks postop

\*\* Patient will perform Home Exercise including DVT prevention and isometric exercises to allow time for optimal healing