

 Tim Wang, M.D.
 Orthopaedic Surgery and Sports Medicine

 10710 N Torrey Pines Road
 2205 Vista Way, Suite 210

 La Jolla, CA 92037
 Oceanside, CA 92054

 Phone: 760-704-5750
 Phone: 760-230-5188

 Fax: 858-404-1813
 Fax: 760-633-6182

www.timwangmd.com

## **Proximal Hamstring Repair Postop Protocol**

<u>Postop</u>	<u>Goals</u>	<b>Precautions</b>	<u>Exercises</u>
<b>Weeks 0-6</b> PT 1-2x/week HEP daily	Protect tendon repair Pain Control Swelling reduction Wound Observation Modalities	50% WB x 2wks with knee brace locked in full extension when ambulating Progress WBAT at 2 wks with knee brace in extension, 1 crutch Knee flexed to 90 degrees when seated in chair. No hip flexion>90. Avoid combined hip flexion and knee extension	Supine HS extension isometrics with knee extended OK Quad Sets, Ankle Pumps, Core Isometrics Prone passive ROM knee with hip extended Prone AAROM starting 4wks postop
	Normalize Gait	No active hamstring contraction	Activo/Passivo POM Gait training
Weeks 6-12 PT 2-3x/week HEP daily	Normalize Gait Control and no pain with functional movements	Avoid Dynamic stretching Avoid loading the hip at deep flexion angles	Active/Passive ROM, Gait training Stationary bike with seat elevated Single leg balance
	Return to ADLs Work on single leg balance, partial lunge	Do not exceed 45° hip flexion during partial lunge	Heel slides, standing hip extension, clamshells, quarter squats bilateral, DL bridge 8wks+: Begin strengthening with isometric
			and concentric hamstring sets,
Weeks 12+ PT 2x/week HEP daily	Functional movements without unloading affected leg Limb control and no pain with sport and work specific movements	Avoid impact No pain with strength training	Continue hamstring strengthening and advance towards lengthened hamstring positioning, step up/downs Increase standing concentric and Begin eccentric strengthening with single leg forward leans, double leg bridging, single
	novements		leg bridge lowering
	la successive de l'étais succes		Low impact cardio
<b>4-5 month+</b> PT 1x/wk HEP daily	Increase mobility and function including sport specific	No pain during pain or impact activity Defer run progression until single leg control, 8" step down test negative Return to sport when <10% side to side deficit on Biodex, typically 6-9	<ul> <li>Begin run progression / plyometric work</li> <li>Continue strengthening including higher velocity hamstring positioning, eccentric, single leg dead lifts</li> <li>Impact control with 2 leg → 1 leg landing</li> <li>Ensure dynamic neuromuscular control</li> </ul>
		months	with sport activities