

# Postoperative Rehabilitation Protocol for Gluteus Medius / Minimus Repair



Dr. MacLean

Physical therapy should be started within a few days 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

*If you have any problems or questions,  
please call your doctor's office (8am-5pm).  
Answering service for after hours.*

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#### PRECAUTIONS/RESTRICTIONS

- Weight bearing as tolerated (wean by week 8 if not yet done)

#### RANGE OF MOTION

- Progress ROM as tolerated
- Start 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/adductors
- Continue to advance LE strengthening and flexibility
- Advance core stability and strength
- Lunges
- Plyometrics
  - Balance and proprioception to single leg as tolerated



**Stronger  
starts  
here.**

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