

Total Hip Arthroplasty
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**Central Kansas
Orthopedic Group**
SURGICAL SPECIALISTS & PHYSICAL THERAPY

0-14 days:

Precautions:

1. No straight leg raises into hip flexion
2. Hip precautions (posterior hip only)

Weight Bearing: Specified per Physicians' orders

Clinic Activities:

1. Manual Therapy for flexibility, ROM
2. Gait activities to decrease antalgic gait
3. Closed Kinetic Chain hip, knee, and LE strengthening (total gym squats, standing hip abduction/extension, calf raises, standing hamstring curls, etc)
4. Total Gym or LE strengthening
5. Hamstring Curls
6. Mini Squats

Home Exercise Program:

1. Prone lying
2. Isometrics: Glute, Hamstrings, Quadriceps
3. Ball Squeeze
4. Ball TKE

Weeks 2 - 4:

Home Exercise Program:

1. Walking program: 5-10 min per day
2. Flexion/extension of knee and maintain hip ROM
3. Single leg balance activities (depending on WB status), balance activities

Goals:

1. 0 – 90 degrees
2. Non-Trendelenburg gait cycle
3. Improved sleep, swelling, and pain

Clinic Activities:

1. Balance and proprioception activities (ladder, dynamic stability, visual stimulation)
2. Manual therapy to progress Range of Motion (contact Physician if complications)
3. Upper level strengthening: closed and open kinetic chain exercises
4. Resisted walking
5. Step ups/downs

Weeks 4-6:

Home Exercise Program:

1. Cardiovascular exercise: 20+ min/day of combination of exercise (walking, biking, swimming)

Goals:

1. Independent with fitness program/Home exercise program
2. 5/5 with hip manual muscle tests, 4+/5 quadriceps strength
3. Reciprocating stairs (6-8")
4. Return to work or full ADL's at home
5. Ambulation w/o assistive device, non-antalgic gait pattern

Clinic Activities:

1. Upper level balance, proprioception, single and double LE's
2. Squats and full body weight activities (open and closed kinetic chain)
3. Set up on final home exercise program to focus on weaknesses
4. Work on proper body mechanics with squatting, lifting, etc.
5. Hip isotonics with weight above knee