



Proximal Hamstring Tendon Repair

<u>Postop</u>	<u>Goals</u>	<u>Precautions</u>	<u>Exercises</u>
<p>Weeks 0-6 PT 1-2x/week HEP daily</p>	<p>Edema and pain control Protect surgical repair</p> <p>Light desensitization massage to the incision and posterior hip</p> <p>Scar massage</p> <p>Silicone patch over incision</p>	<p>Non-weight bearing with crutches x 6 weeks</p> <ul style="list-style-type: none"> - Knee brace locked at 30° while ambulating - Knee flexed to 90° while sitting <p>No active hamstring contraction</p> <p>No hip flexion with knee extended</p> <p>No active knee flexion against gravity</p> <p>Knee extension limited pending intra-operative tension of repair</p>	<ul style="list-style-type: none"> - Pelvic tilts (5 sec holds x 20/day) - NMES c SAQ (1/2 bolster) with hip flexion less than 20° - Isometrics hip abduction/adduction/ER (5 sec holds x 10/day) - Quadriceps sets (4x 20 reps/day) - 5 Ankle pumps (20-30 reps/hour) - Begin passive ROM of the knee and hip at week 2. Do not exceed 45° of hip flexion. Do not allow knee extension beyond the restrictions stated above and limited by the brace - Begin gentle AROM of the knee and hip at week 4. Do not exceed 45° of hip flexion. Do not allow knee extension beyond the restrictions stated above and limited by the brace. No active knee flexion against gravity.
<p>Weeks 6-9 PT 2x/week HEP daily</p>	<p>Restoration of normal gait</p> <p>Weight-bearing progression to full weight bearing as tolerated</p> <p>Return to pain-free functional ADL</p>	<p>No hamstring strengthening exercises</p> <p>No hamstring stretching exercises</p>	<ul style="list-style-type: none"> - Continue week 0-6 exercises - May begin active knee flexion against gravity (concentric) - Weight shifts - Straight leg raises or SAQ into SLR - Gentle quadruped rocking - Gentle stool stretches for hip flexion and adduction - Gluteus medius strengthening progresses to isotonic in a side-lying position (clam-shells)
<p>Months 3-4 PT 1-2x/week HEP daily</p>	<p>Return to unrestricted ADLs at home and work</p> <p>Hamstring strengthening</p>		<ul style="list-style-type: none"> - Continue week 6-9 exercises - Begin hamstring flexibility exercises - Begin hamstring strengthening exercises <ol style="list-style-type: none"> 1. Begin with hamstring curls strengthening exercises with the patient standing with the hip help in a neutral position and the lower leg moving against gravity in pain-free arcs 2. Resistance is increased 1lb at a time as tolerated with emphasis on high reps (50 reps) and high frequency (4-5x/day)



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		<ol style="list-style-type: none"> 3. When able to move through full and pain-free knee flexion arc with 8-10lbs of high reps, can transition from standing to machine hamstring curls <ul style="list-style-type: none"> - Begin total leg and hip strengthening exercises <ol style="list-style-type: none"> 1. Quarter squats: begin bilateral and progress to unilateral 2. Heel raises: begin bilateral and progress to unilateral 3. Gluteus maximum strength exercises – progress from prone (heel pushes with knee flexed to 90° to hip extension with the knee flexed at 90° to hip extension with extended knee) to supine (bilateral to unilateral bridging) 4. Gluteus medius strengthening is further progressed to the upright position (hip hiking and multi-hip machine) 5. Patients can begin unilateral knee extension and leg press activities with light resistance and increase resistance as surgical hip tolerates - Balance and proprioception (Balance board → foam → dynadics)
<p>Months 5-9 HEP daily</p>	<p>Completion of a functional program for the patient's return to sport activity</p>	<ul style="list-style-type: none"> - Continue week 12 exercises - Perform advanced proprioceptive training - Closed kinetic chain hamstring exercise, such as advanced step downs, double to sing-leg Swiss ball hamstring curls, resisted incline hip extensions, Roman dead-lifts, and half to full squat progression with progressive resistance, can gradually be introduced - Low level plyometrics, such as jump rope, step lunges in multiple directions with progression to walking lunges, can be introduced - Patient may begin a light jogging progression - Return to sporting activities is typically allowed at 6-9 months post-operatively
<p><u>Progression Criteria to Return to Sport</u></p> <ul style="list-style-type: none"> - No pain with normal daily activities - Hip and knee range of motion within functional limits - Community mobility without pain - Hamstring strength is 75% of the contralateral side (concentric and eccentric) 		