Proximal Hamstring Repair Physical Therapy Protocol

Name_______________________________________________________________ Date__________________

Diagnosis      s/p RIGHT/LEFT    Proximal Hamstring Tendon Repair

Date of Surgery_________________________

Frequency:  1     2     3     4      times/week     Duration:  1     2     3     4     5     6 Weeks

Weeks 1-6:
___ NWB in Custom Brace at all times
___ Hip @ 0° Extension (NO FLEXION @ HIP)
___ Knee @ 45° Flexion (NO EXTENSION @ KNEE)
___ Gait Training – Walker, Knee Scooter
___ ADL’s
___ Upper Extremity Strengthening

Weeks 6-12:
___ Progress Weight Bearing
___ Initially begin Knee extension by 10°/ week (with Hip in extension)
___ Gradual progression of Hip flexion @ 6 weeks
___ Progress Hip flexion with Knee in flexion
___ Progress off crutches as strength and leg control improve
___ Progressive strengthening to start @ 6 weeks

Hamstrings / Hip Adductors / Hip Abductors / Hip Flexors
___ GOAL: Avoid stress at repair site (Tensile Loads) until 6 weeks post-op

Full Knee extension with Hip in extension at 6 weeks, then begin
Hip flexion - Gradual Hamstring Flexibility after 6-8 weeks post-op

___ Functional Capacity Evaluation    ____Work Hardening/Work Conditioning      ____ Teach HEP

Modalities
___ Electric Stimulation   ___ Ultrasound   ___ Iontophoresis   ___ Phonophoresis   ___ TENS   ____ Heat before

___ Ice after ___ Trigger points massage    ____ Therapist’s discretion

Signature__________________________________________ Date__________________