ROCKFORD ORTHOPEDIC

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Proximal Hamstring Repair

(0 – 6 weeks)

The time frames for each phase may be extended if the repair is delayed.

Physical Therapy - Twice a week for 6 weeks.

Rehabilitation Goals
- Protection of the repaired tendon(s)

Weight Bearing
- Use axillary crutches for up to 6 weeks.
- Post-operative weeks 0-6: Slow progression from 20% to 50% weight bearing.

Brace
- The use of a brace is determined by the surgeon at the time of surgery. If a brace is used, the flexion is restricted to 60 degrees.

Precautions
- Avoid hip flexion coupled with knee extension
- Avoid unsafe surfaces and environments

Suggested Therapeutic Exercise
- Quad sets
- Ankle pumps
- Abdominal isometrics
- Passive knee range of motion (ROM) with no hip flexion during knee extension
- Post-operative weeks 3-4: Begin pool walking drills (without hip flexion coupled with knee extension), hip abduction, hip extension, and balance exercises
- Scar mobilizations

Cardiovascular Exercise
- Upper body circuit training or upper body ergometer (UBE)

Progression Criteria
- 6 weeks post-operative

(6 weeks – 3 months)

Physical Therapy - Twice a week

Rehabilitation Goals
- Normalize Gait
- Good control and no pain with functional movements, including step up/step down, squat, partial lunge (do not exceed 60 degrees of knee flexion)

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Precautions
- Avoid dynamic stretching
- Avoid loading the hip at deep flexion angles
- No impact or running

Suggested Therapeutic Exercise
- Non-impact balance and proprioceptive drills - beginning with double leg and gradually progressing to single leg
- Stationary bike
- Gait training
- Begin hamstring strengthening - start by avoidance of lengthened hamstring position (hip flexion combined with knee extension) by working hip extension and knee flexion moments separately; begin with isometric and concentric strengthening with hamstring sets, heel slides, double leg bridge, standing leg extensions, and physioball curls
- Hip and core strengthening

Cardiovascular Exercise
- Upper body circuit training or UBE

Progression Criteria
- Normal gait on all surfaces
- Ability to carry out functional movements without unloading the affected leg or pain while demonstrating good control
- Single leg balance greater than 15 seconds
- Normal (5/5) hamstring strength in prone with the knee in a position of at least 90 degree knee flexion

(After 3 months)
Physical Therapy - Twice a week as needed

Rehabilitation Goals
- Good control and no pain with sport and work specific movements, including impact

Precautions
- No pain during strength training
- Post-activity soreness should resolve within 24 hours

Suggested Therapeutic Exercise
- Continue hamstring strengthening - progress toward strengthening in lengthened hamstring positions; begin to incorporate eccentric strengthening with single leg forward leans, single leg bridge lowering, prone foot catches, and assisted Nordic curls
- Hip and core strengthening
- Impact control exercises beginning 2 feet to 2 feet, progressing from 1 foot to the other and then 1 foot to same foot
- Movement control exercise beginning with low velocity, single plan activities and progressing to higher velocity, multi-plane activities

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- Sport/work specific balance and proprioceptive drills
- Stretching for patient specific muscle imbalances

Cardiovascular Exercise
- Replicate sport or work specific energy demands

Return to Sport/Work Criteria
- Dynamic neuromuscular control with multi-plane activities at high velocity without pain or swelling
- Less than 10% deficit for side to side hamstring comparison