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ANTEROLATERAL HIP REPLACEMENT  
PHYSICAL THERAPY GUIDELINES  
POST HOSPITAL DISCHARGE

- **Hips replacements are different from most other joints. Aggressive therapy can really hurt them.**
- **Do not push the limits of range of motion. Hips that have been replaced regain ROM regardless of PT. Aggressive PT can cause needless pain or greater trochanter fractures in osteoporotic bone.**
- **No active hip abduction exercises for 6 weeks post-op. Walking will give the stress the muscles need, but exercises will pull on the suture line, hurt them, and do no good at all for the first 6 weeks. Don't baby the hip, but also don't give it a "hard work-out" for 6 weeks.**
- **The emphasis should be on proper gait and regular walking, not repetitive hip-specific motions.**
- **No "hip precautions" need to be followed. Let the patients hip by his/her guide for positions and activities.**
- WBAT unless specifically directed otherwise.
- No straight leg raises (SLR) as a repetitive exercises for 6 weeks-as a functional activity, leg lifting is permissible.
- Gait training: Normal reciprocating gait. Progress from walker/crutch to cane ambulation. The cane is discontinued when the patient is ambulating without a positive Trendelenberg test.
- Muscle strengthening directed toward any weakness present in the operative extremity (besides the hip abductors) as well as any generalized weakness in the upper extremities, trunk or contralateral lower extremity.
- Proprioceptive training to improve body/spatial awareness of the operative extremity in functional activities.
- Functional training to promote independence in activities of dialing living and mobility.
- Okay to sleep on the operative hip or non-operative hip
- Sexual activity may be resumed when comfortable.
- Iliotibial Band Stretches-Supine stretches may be initiated at two (2) weeks post operatively, standing at twelve (8) weeks post-operatively
- Scar Massage/Mobility-May be instituted 2 weeks post-op when the incision is clean and dry.

If you have any questions regarding this approach or the postoperative rehab please feel free to contact us.