

## Total Hip Arthroplasty (Anterior Approach)

Dr. Mulder

Time Frame	Treatment	Goals
Post-Op Day	<ul style="list-style-type: none"> <li>• Instruction in signs and symptoms of infection</li> <li>• Instruction in cryotherapy</li> <li>• Instruction in HEP including quad sets, glute sets, hamstring sets, hook-lying passive hip flexion, supine active hip ABD, and standing hip ABD</li> </ul>	<ul style="list-style-type: none"> <li>• Independent in HEP</li> <li>• Independent in cryotherapy</li> <li>• Independent with use of AD</li> </ul>
Phase I (1-4 weeks)	<ul style="list-style-type: none"> <li>• Frequency: NO in clinic PT, HEP from post-op day only</li> <li>• Removal of dressing 1 week after surgery</li> <li>• Promote edema control and cryotherapy</li> <li>• Slow progression of activity at home</li> <li>• Progression of normal gait pattern with least restrictive assistive device</li> </ul>	<ul style="list-style-type: none"> <li>• Progression of functional activities as tolerated</li> <li>• Progression on assistive devices depending on quad function and non-antalgic gait</li> </ul>
Phase II (4-8 weeks)	<ul style="list-style-type: none"> <li>• Frequency: PRN – based on MD recommendations after 4-week follow up</li> <li>• Scar tissue mobilization at 4 weeks post-op depending on healing rate of incision</li> </ul>	<ul style="list-style-type: none"> <li>• Non-antalgic gait ascending/descending stairs</li> <li>• No assistive device</li> <li>• Independent in ROM and functional LE strengthening exercises</li> </ul>