

Total Hip Arthroplasty (Anterior Approach)

Dr. Nessler

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