

Proximal Hamstring Repair

	msu mg Kepan		
Weeks One To Four	Weeks Four To Six		
Initial Evaluation	Evaluate		
 Knee and ankle range of motion Inspect for signs of infection or DVT Assess RTW and sport expectations Gait (patient typically presents in a custom fitted hip orthosis that restricts hip flexion) TTWB x 2 weeks, 25% WB x 2 weeks, then WBAT 	 Range of Motion (avoid terminal ranges) Gait Pain PROM 		
Patient Education	Patient Education		
 Support physician prescribed meds Reinforce use of brace and assistive device Restate surgical precautions (TTWB x 2 weeks, 25% WB x 2 weeks, minimal to no hip flexion, and no hamstring activity x 6 weeks) Discuss frequency and duration of treatment (2-3x/wk is expected for the first 10 weeks, followed by intermittent appointments over another 3-4 months) 	 Reinforce use of brace Begin WBAT and wean from crutches as appropriate Restate surgical precautions and discuss with patient scenarios that may cause re-injury (continue to avoid end range hip flexion) 		
Therapeutic Exercise	Therapeutic Exercise		
 Review and update pre-op HEP (quad sets, ankle pumps) Avoid heel slides/ hamstring activity x 6 weeks May initiate heel raises and weight shifting activity as tolerated 	 Begin gentle AAROM, and AROM at week 4 Initiate AAKE, AROM SLR, ABD, ADD at 4 weeks Initiate single leg static balance activity as tolerated Multi angle sub-maximal isometrics (pain free) at 4 weeks 		
Manual Techniques	Manual Techniques		
 PROM hip and knee Initiate mobilization of incision when tissue healing is appropriate 	 May continue PROM of hip and knee as needed May continue mobilization of incision as needed. 		
Modalities	Modalities		
NMES / InterferentialIce	Modalities may be used as needed		
Goals	Goals		
 Control pain Minimize swelling Independence with post-op precautions 	 Reduce pain and swelling Improve gait on flat level surfaces within brace Restore full PROM 		



🗖 Frisbie Memorial Hospital 🏻 Marsh Brook Rehabilitation Servic		1 Wentworth-Douglass Hospital		Durham: Rehab	and Sports	Therapy C	Center
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Weeks Six To Twelve	Weeks Twelve To Discharge		
Evaluate	Evaluate		
 Ability to contract hamstring Gait Pain Active and passive range of motion 	 Address any deficits that may limit RTW or sports goals Functional movement screen 		
Patient Education	Patient Education		
 Progress to FWB if not completed prior to 6 weeks Discharge brace week 6 	Discuss the benefits of completing a CFA program and introduce to CFA staff		
Therapeutic Exercise	Therapeutic Exercise		
 Initiate bicycle no resistance at 6 weeks Add active hip extension and hamstring curl no resistance at 6 weeks May initiate Aquatic Therapy at 6 weeks Begin isotonic activity at week 8 Progress closed chain activity to include partial assisted squat and leg press activity at week 8 Single leg and step up activity at week 10 Initiate partial/assisted lunging activity at 10 weeks 	 May initiate CFA program Consider use of a dynamic warm-up prior to activity Progress to sport specific activity Incorporate activity for appropriate timing and activation of core musculature Initiate jogging no sooner than 12 weeks with appropriate strength/movement testing, and physician approval 		
Manual Techniques	Manual Techniques		
Any manual techniques as needed	Any manual techniques as needed		
Modalities	Modalities		
➤ Modalities may be used as needed	Modalities may be used as needed		
Goals	Goals		
 Eliminate pain with normal daily activity Restore normal gait on all surfaces Normal AROM 4+ MMT of all involved musculature by 8-10 weeks 	 5/5 MMT of all involved musculature Appropriate completion of functional movement screen activities Return to work and sport activity without pain Discharge to independent program 		

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