# Post-operative Proximal Hamstring Repair Protocol

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### First 4 weeks

- 1) Keep brace on and locked with knee bent. Brace may be removed to change clothes and for grooming but safe position is with the knee flexed and the hip extended or flexed (lying in the fetal position, sitting in a chair). The unsafe position is with the knee extended and the hip flexed (such as sitting up in bed with the legs extended on the bed or bending over to touch your toes).
- 2) Use crutches or walker and do not bear weight.
- 3) Change dressing on second day after surgery and replace with dry dressing. Leave tape/steri-strips on the skin and do not remove unless they fall off on their own.
- 4) Use ice pack/cryocuff at least3 times each day for 15 minutes each time to reduce swelling and pain
- 5) Keep wound/dressings dry. No showers for 7 days and no baths for three weeks
- 7) Pain medication, muscle relaxant, and vitamin D/calcium supplementation will be prescribed. Do not use anti-inflammatory medication like Advil (ibuprofen), Aleve(naproxen) for 6 weeks after surgery.
- 8) Occasionally, you may be placed on a blood thinner.

#### At first clinic visit (1-2 weeks):

- 1) Brace remains on and locked for 4 weeks.
- 2) Continue crutches.
- 3) Sutures will be removed if necessary but often they are buried under the skin. No baths or pools for 3 weeks after surgery.
- 4) Do not need to wear dressing if brace does not rub against the wound.
- 5) Steri-strips will fall off on their own. If they do not fall off, pull them off gradually by two weeks after surgery
- 6) Xrays will be obtained in clinic.

#### 4- 6 weeks

- 1) Will unlock the brace and allow partial or touch down weight bearing with the crutches or walker
- 2) Brace can be removed to sleep but do not forget to avoid unsafe positions.

## 6 weeks to 12 weeks

### 6 week clinic visit:

- 1) Knee should be fully extended.
- 2) Brace is removed.
- 3) Will start to wean off of the crutches or walker over days to weeks.

## PT goals:

- 1) Start gentle hamstring stretching
- 2) Gait training
- 3) May start closed chain exercises and co-contraction of the quads and hamstring.

### **Exercises:**

- 1) Wall slides and mini-squats to 45 degrees (closed chain 0-45).
- 2) Open and closed chain quadriceps exercises with increasing weights.
- 3) Closed chain hamstring exercises with increasing weights.
- 4) Toes raises, step ups.

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- 5) Stationary bike when range of motion allows. May use treadmill with an incline. May start elliptical trainer once proficient on the stationary bike.
- 6) Swimming (free style stroke and backstroke only; avoid heavy kicking strokes).

## 3 to 6 months

### PT goals:

1) Continue all previous exercises to progress to full strength of quadriceps and hamstrings. May participate in any weightlifting activity that is not painful.

### **Exercises:**

- 1) Start jogging at 5 months.
- 2) Squats, leg presses and progress to full weight by 6 months. All weight training should be slow, controlled. No ballistic motion. No cutting maneuvers.

### 6-9 months

### Goals:

1) Sport specific exercises with gradual return to competition.

#### **Exercises:**

1) Begin with sport-specific exercises and cutting maneuvers and progress to playing over 1-6 weeks

## Additional instructions:

If right leg is operative leg, may not drive automatic transmission vehicle for 6-8 weeks.

If left leg is operative leg, may drive automatic transmission vehicle after have stopped using narcotic pain medication.

May return to sedentary desk work in one week.

May return to work requiring standing gradually over 6-8 weeks.

May return to heavy labor in 6 months.

## Duration and frequency of PT:

For week 6-12 (12 visits): supervised 2x/week. Perform exercises on your own 5-7 days/week For week 12-18 (12 visits): supervised 2x/week. Perform exercises on your own 3-5 days/week For weeks 18-24 (6 visits): supervised 1x/week. Perform exercises on your own 3-5 days/week