

## **Dr. DANIEL MYER'S PROXIMAL HAMSTRING REPAIR PROTOCOL**

- **0-2 WEEKS**
  - Toe touch weight bearing with crutches/walker
  - May have hip ORIF to limit active hip flexion
  - May have knee brace to limit full knee extension
- **2-4 WEEKS (\*\*Some exercises may be delayed if knee brace to limit extension)**
  - PWB 50% w/crutches/walker
  - Quad sets
  - Ankle pumps
  - S/L hip abduction
  - Gentle hip/knee PROM (avoid lengthened hamstring position)
    - Supine hip flexion (knee in flexion) to 45 degrees
    - Prone hip extension (knee in flexion) to tolerance
    - Prone knee flexion PROM to tolerance
  - Initiate scar massage once incision closed/healed
- **4-6 WEEKS (\*\*Some exercises may be delayed if knee brace to limit extension)**
  - Gradually progress post op knee brace to full extension per surgeon
  - WBAT with 2 crutches
  - Supine SLR to 30 degrees hip flexion max
  - SAQ with hip flexion angle below 30 degrees
  - Continue with existing exercises and PROM
    - May progress hip flexion PROM to 60 degrees as tolerated
    - May add hip ABD PROM to tolerance below 30 degrees hip flexion
- **6 WEEKS**
  - Brace should be locked in full knee extension
  - Progressive WBAT to FWB progressing from 2 to 1 crutch to cane to no assistive device as gait normalizes as tolerated
  - Stationary bike at appropriate seat height to avoid excessive hip flexion and lengthened hamstring position of full knee extension
  - Supine SLR t 45 degrees
  - Standing calf raises
  - Standing theraband TKE
  - Submax hamstring isometrics multi-angle avoiding lengthened hamstring position
  - Supine abdominal brace
- **7 WEEKS**
  - May begin to gradually unlock brace to allow knee flexion during gait
    - Progress to 30-45 degrees knee flexion and eventually D/C brace per surgeon recommendations

## 8 WEEKS

- Supine abdominal brace with mid-range knee flexion heel slide/bent knee lift
- May begin isotonic strength
- Standing hip extension
- Standing hip abduction
- Standing hip gluteus medius (hip ext/ABD) at 45 degrees
- Single leg stance
- Mid-range double leg knee flexion isotonic
- Stand mid-range knee flexion
- Prone hip extension
- Mid-range supine physioball double leg curls (No bridge and avoid lengthened hamstring position)
- Isokinetic strength if available
- 10 WEEKS
  - Closed chain strength
    - Mini squat/wall slide
    - Double leg bridge
    - Step ups
    - Lunges (limit knee flexion angle to 60 degrees)
  - Aquatic therapy may be initiated
  - Supine physioball bridge and hamstring curl
  - Clamshell
- 12 WEEKS
  - Gentle hamstring stretching
  - Progress to HS strengthening in lengthened position
  - Elliptical/Stairmaster
  - Eccentric strength in closed chain
    - Single leg bridge lower
    - Double leg hip hinge/dead lift
      - Progress to single leg as able
- 16-24 WEEKS
  - Jogging
  - Plyometrics
  - Progress strength, eccentric, proprioception, plyometrics
  - Progress to sport specific drills once cleared by surgeon
- 5-8 MONTHS
  - Possible return to full sport participation