

This rehabilitation program is designed to return the individual to their full activities as quickly and safely as possible, following a hip pinning or ORIF. Modifications to this guideline may be necessary dependent on physician specific instruction or other procedures performed. This evidence-based hip pinning or ORIF guideline is criterion-based; time frames and visits in each phase will vary depending on many factors. The therapist may modify the program appropriately depending on the individual's goals for activity following a pinning or ORIF.

This guideline is intended to provide the treating clinician a frame of reference for rehabilitation. It is not intended to substitute clinical judgment regarding the patient's post-operative care based on exam/treatment findings, individual progress, and/or the presence of concomitant procedures or post-operative complications. If the clinician should have questions regarding post-operative progression, they should contact the referring physician.

Precautions:

- Weight Bearing: as per physician order

Phase	Suggested Interventions	Goals/Milestones for Progression
<p>Phase I</p> <p>week 0-2</p>	<p><i>Therapy:</i></p> <ul style="list-style-type: none"> • Control pain and swelling with ice, modalities PRN, • Exercise for strengthening of the unaffected extremities and gentle Active assisted movements of the affected lower extremity. Quad sets, Ham sets, hip abduction, heel slides, SAQ, assisted SLR's (in pain free). Instruct in HEP • Transfer training • ADL training • Gait training: with FWW, Instruct in stairs with assistive device if patient has to negotiate them at home Increase ambulation distance with FWW • Modalities PRN to control pain and swelling 	<p><i>Goals of Phase:</i></p> <ol style="list-style-type: none"> 1. Skin healing 2. Edema control 3. Pain control 4. Maintain weight bearing status 5. Improve neuromuscular activity 6. Return Home when meets criteria, assess for SNF/Rehab

<p>Phase II</p> <p>Post-op weeks 2-6</p>	<p><i>Therapy Additions:</i></p> <ul style="list-style-type: none"> • Continue post hip pinning exercises increasing reps and resistance as able. Progress supine exercises to include bridging, clams, side lying hip abduction (in pain free motions) • 4-6 weeks: May progress to standing hip exercises within weight bearing restrictions, marching, hip abduction, heel raises, mini squats • Improve neuromuscular activity. 	<p><i>Goals of Phase:</i></p> <ol style="list-style-type: none"> 1. Healing 2. Pain and edema control, modalities PRN 3. Gait maintaining weight bearing status, progressing to normal gait pattern. <p><i>Criteria to Advance to Next Phase:</i></p> <ol style="list-style-type: none"> 1. Healing appropriate for stage to move on.
<p>Phase III</p> <p>Weeks 6+</p>	<p><i>Therapy additions:</i></p> <ul style="list-style-type: none"> • Continue exercise advancement as per needed function • Exercises to include Single leg stance, step ups and step downs • Address balance deficits 	<p><i>Goals of Phase:</i></p> <ol style="list-style-type: none"> 1. Normal ROM for involved hip and knee 2. Improve strength to 4/5 to 5/5 3. Ambulate independently on all surfaces with assistive device and proper weight bearing status 4. Independent with HEP <p><i>Criteria to Advance to Next Phase:</i></p> <ol style="list-style-type: none"> 1. Normal Gait pattern 2. Independent HEP