

# Trochanteric Bursectomy with IT Band Lengthening

## Physical Therapy Protocol

### Precautions

- **Weight-Bearing:** WBAT (weight bearing as tolerated) with crutches for 1–2 weeks.
- **Activity Restrictions:**
  - Avoid aggressive hip abduction strengthening.
  - Postpone aggressive functional activities until cleared by the physician.

### Phase I – Immediate Postoperative Phase (Day 1 to Week 3)

#### Goals:

- Restore non-painful range of motion (ROM) and flexibility
- Reduce pain and inflammation
- Begin muscular strengthening
- Normalize a pain-free gait

#### Day 1–5:

- WBAT with crutches to normalize gait and control pain

#### Exercises:

- Ankle pumps, gluteal sets, quad sets
- Hip isometrics (adduction, flexion)
- Heel slides, pelvic tilts, seated knee extensions
- AAROM and PROM for hip and knee to tolerance

- Single-leg knee-to-chest stretch
- Mini-squats (0–45°) by Day 3

**Day 5–7:**

- Continue above exercises and add:
  - Hip isometrics (include abduction)
  - Weight shifts, standing hip extension, supine trunk rotations
  - Stationary biking (if pain-free) with high seat
  - Double-leg bridges, supine hamstring stretches

**Week 2:**

- Progress AAROM and PROM exercises
- Light stretching of hip flexors, adductors, and IT band
- Pain-free standing hip abduction, seated ER/IR
- Gradual strengthening with low resistance

**Week 3:**

- Emphasize improved ROM and stretching
- Introduce:
  - Hip mobilizations (Grade III/IV)
  - Straight leg raises in all directions
  - Light leg press, single-leg bridging, planks
  - Sidelying clams, lunges onto box, lateral step-ups
  - Tilt board and wall squats, hamstring curls, physioball squats
  - Begin pool exercises (e.g., retrowalking, ROM drills) once incisions are closed

**Phase II – Intermediate Phase (Weeks 4–6)**

**Goals:**

- Restore full, pain-free motion
- Normalize strength in lower extremities and core

- Gradually increase functional activities

**Week 4–5:**

- Progress isotonic strengthening
- Maintain flexibility through ROM and stretching
- Increase duration/resistance on stationary bike
- Introduce:
  - Elliptical training
  - Proprioception drills and perturbation training
  - Bosu/Biodex squats, tilt board, foam balance
  - Single-leg balance exercises emphasizing glute medius
  - Step-downs, step-ups, functional hamstring curls

**Week 5–6:**

- Progress functional drills:
  - Lateral, forward, diagonal lunges
  - Walking for exercise (increase duration gradually)
  - Pool drills for functional motion/strength

**Phase III – Advanced Exercise Phase (Weeks 7–8)**

**Goals:**

- Maintain full ROM
- Improve muscular strength, power, and endurance
- Gradually reintroduce functional activities

**Criteria to Begin:**

- Full, non-painful ROM
- Satisfactory hip stability
- Minimum "good" strength grade
- No pain with functional drills

**Weeks 7–8:**

- Continue ROM, stretching, mobilizations
- Progress exercises:
  - Leg press (0–90°), vertical squats (0–60°)
  - Sidelying clams, step-downs, lateral lunges with resistance
  - Core strengthening (bridges, physioball sit-ups)
  - Increase aerobic activity (biking, walking, elliptical)
  - Stair-stepping and core/hip functional drills

**Phase IV – Return to Activity Phase (Weeks 8–12)**

**Goals:**

- Enhance muscular strength, power, and endurance
- Progress functional activities
- Maintain hip mobility

**Criteria to Begin:**

- Full, pain-free ROM
- Satisfactory clinical exam
- Hip strength  $\geq$  75–80% of contralateral side
- No pain/tenderness during functional drills

**Weeks 8–12:**

- Pool running and treadmill walk/run intervals
- Functional agility drills:
  - Backward running, side slides, fast feet, cone step-overs
- Plyometrics (e.g., box jumps for select patients)
- Begin interval sports or golf programs if pain-free

**Final Notes**

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Innovating **BIG RESULTS**  
Through Small Incisions

- Progression should be guided by pain tolerance and clinical milestones
- Follow physician recommendations before advancing phases
- Modify activities based on individual response and recovery rate

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