Connecticut Orthopaedics

Megan R. Wolf, MD
Sports Medicine/Foot & Ankle

Core Muscle Injury Repair-6 Week
Post-Operative Protocol

Day 1 to 7:

- Control post-operative pain and swelling. Compression shorts may be beneficial
- Avoid activity that increases intra-abdominal pressure – such as lifting.
- Recommend wearing compression shorts to help control swelling
- Walk as tolerated – aim for 1+ mile per day, increase as tolerated

  Exercises:
  - Kegel exercises 2 times per day
  - Isometric hip adduction, glute sets, transverse abdominus (TA) activation
  - Heel raises
  - Light core exercises – quadruped progression, double legged bridging, clamshells

Day 8 to 14:

- Recommend wearing compression shorts to help control swelling as needed in daily activities, for exercise
- Balance core and back, anterior and posterior chain exercises
- Avoid upper body lifting

- Begin gentle soft tissue massage of abdominal muscles and hip adductors both in rehab and at home at least twice per day. May also address surrounding hip musculature.
  - Avoid aggressive massage techniques such as instrument assisted or active release

  Exercises:
  - If a pool is available and incision is well healed, may begin pool walking
  - Progress to AROM and then light resistance exercises. Modify exercises as needed for pain, focus on good form and core control.
    - Progress clamshell and bridging resistance
    - Curl ups with TA activation. No full sit-ups.
    - Side-lying hip abduction and adduction. Start with AAROM if needed.
    - Single leg balance progression
    - Lunge progression with good form
    - Monster walks with light resistance band
    - Modified prone and side planks. Must be able to do 5 reps for 30 seconds with proper form before progressing to full planks.
    - Scapular stabilization exercises in standing
  - Light stretching
    - Hip flexors
    - Hamstrings
    - Quads
    - Groin
    - Side bending
  - Cardiovascular
    - Progress walking program
    - Elliptical or stair master as tolerated
    - If sufficient strength, initiate walk to jog program at day 10-12.

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Day 15-21:

- Recommend wearing compression shorts for exercise
- Balance core and back, anterior and posterior chain exercises
- Maintain proper pelvic and lower extremity alignment and control

- Continue massage of abdominals, hip adductors, as well as other hip and core musculature.
    - Avoid active release or instrument assisted massage to the hip adductors, rectus abdominus
    - Foam rollers should not be used for at least 6 weeks on hip adductors. Foam rolling of surrounding hip muscles can begin at 4 weeks post-op.

<u>Exercises</u>:

- Pool exercises – walking, hip AROM, swimming (no breast stroke)
- Continue single leg balance progression
- Lunge progression with good form
- Step-ups and step downs
- Minisquats progressing to full squats
- Monster walks
- Modified prone and side planks. Must be able to do 5 reps for 30 seconds with proper form before progressing to full planks.
- Continue to progress jogging program
- Initiate low impact agility program, progress as tolerated
- Initiate light sport specific activity

Day 22-28:

- Balance core and back, anterior and posterior chain exercises
- Maintain proper pelvic and lower extremity alignment and control
- Re-introduce weight training. Start at no more than 50% of pre-surgery weight level. Upper body exercises should start at/below shoulder height and then progress to overhead.

- Continue massage of abdominals, hip adductors, as well as other hip and core musculature.
    - Avoid active release or instrument assisted massage to the hip adductors, rectus abdominus
    - Foam rollers should not be used for at least 6 weeks on hip adductors. Foam rolling of surrounding hip muscles can begin at 4 weeks post-op.

<u>Exercises</u>:

- Pool exercises – running, agilities
- Lunge progression with good form – add multiplanar, add weight
- Single leg dead lift
- Progress agility work. Increase speed as form improves.
- Progress sport specific work into simulated non-contact drills
- Start abdominal exercises. Limit crunches and situps.

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Day 29-35:

- Balance core and back, anterior and posterior chain exercises
- Maintain proper pelvic and lower extremity alignment and control

- Continue massage of abdominals, hip adductors, as well as other hip and core musculature as needed.
    - Avoid active release or instrument assisted massage to the hip adductors, rectus abdominus
    - Foam rollers should not be used for at least 6 weeks on hip adductors. Foam rolling of surrounding hip muscles can begin at 4 weeks post-op.

  Exercises:
    - Single leg hops
    - Box Jumps
    - Continue sport specific exercises
    - Initiate participation in individual drills in practice, progress to full participation as tolerated

Day 36+:

- Progress into full sport activity
- Continue long term core strengthening program
    - Avoid active release or instrument assisted massage to the hip adductors, rectus abdominus

Revised ***