

## Physical Therapy Prescription

TIME PERIOD	WEIGHT BEARING	RANGE OF MOTION	BRACE	EXERCISES
<b>0-6 weeks</b>	Partial Weight Bearing	Avoid flexion past 90 degrees. Sitting OK. Circumduction exercises.	None	OK to do pool therapy once incisions fully healed. Isometric core, gluteal, quad, adductor, abductor. Clamshell exercises. Exercises should be adjusted to patient comfort. Avoid hamstring exercises.
<b>6-12 weeks</b>	WBAT	Full ROM.	None	May begin strengthening: core, gluteal, quad, hamstring, adductor, abductor. Low impact: swimming, increase biking resistance.
<b>&gt;12 weeks</b>	WBAT	Full ROM.	None	Balance and further strengthening activities. Gradually increase to return to full activities. Anticipate full sporting activities at 4-6 months.

**\*\*\*Begin Therapy 2 weeks post-op**

<p>Dane Todd, MD                  Questions please call: # 402-488-3322                  Fax: 402-488-3336</p> <p>Patient Name: _____</p> <p>Surgery Date: _____</p> <p style="text-align: center;">Surgery Performed (Circled):                      Side (Circled):    Right      Left</p> <p style="text-align: center;">Ischial Takedown      Hamstring Repair      Sciatic Neurolysis</p> <p style="text-align: center;">Lesser Trochanter takedown</p> <p>Physical therapy to evaluate and treat following the above protocol. 1-2x per week for 10 weeks.</p> <p>Notes: _____</p> <p>MD signature:</p>
---