

GLUTEAL TENDON ULTRASOUND GUIDED PERCUTANEOUS TENOTOMY/PRP INJECTION CLINICAL PRACTICE GUIDELINE

The ultrasound guided percutaneous tenotomy allows what was once major surgery to be performed quickly through a small incision. Although post-procedure care will be tailored to fit your individual needs, the following guidelines are designed to help you and your physical therapist after the procedure.

Progression is time and criterion-based, dependent on soft tissue healing, patient demographics and clinician evaluation. Contact Ohio State Sports Medicine at 614-293-2385 if questions arise.

Things to Avoid Before and After Your Procedure

- Over-the-counter pain medicine like ibuprofen (Advil™, Motrin™), naproxen (Aleve™, Naprosyn™) and acetaminophen (Tylenol™): Make every effort to avoid these medications before and after your procedure. They may impair your ability to heal and may increase risk of bleeding.
- Alcohol: Avoid 48 hours before your procedure. Do not consume alcohol while you are taking prescription pain medication.
- Tobacco & nicotine: Consider talking to your physician about stopping. These products impair your ability to heal and might prevent you from getting better.
- Diet: There is no need to fast before the procedure. You may eat normal meals before your procedure and resume your regular diet when you feel able.

Make sure your medical team provides you with the following before or at your procedure:

- Crutches or scooter
- Therapy appointment times
- Follow-up times

Post-procedure Care

- Plan to have a family member or friend drive you home after your procedure.
- Bring your crutches to your procedure if they were given to you.

	Weight Bearing	Activity and Rehab
Days 1-3	<ul style="list-style-type: none">• Toe-touch weight bearing with crutches.	<ul style="list-style-type: none">• Rest
Days 4-7	<ul style="list-style-type: none">• Transition to partial weight-bearing using crutches, placing 50% of your body weight on your treated leg.	<ul style="list-style-type: none">• Begin gentle hip range of motion. Begin isometric strengthening with quad sets and glute squeezes 3 times per day.
Week 2	<ul style="list-style-type: none">• Under the direction of your therapist, begin weaning off the crutches as tolerated.	<ul style="list-style-type: none">• Continue increasing hip range of motion. Perform straight leg raises, hip abduction exercises like clam shells and core stability exercises like planks 1-2 times per day.• You can start swimming and pool exercise when the wound is healed.



	Weight Bearing	Activity and Rehab
Week 3	<ul style="list-style-type: none"> You should be walking normally in your home and in the community. 	<ul style="list-style-type: none"> Continue hip range of motion. Progress hip abduction strengthening and begin body-weight mini-squats 1-2 times per day. Begin using a stationary bike for exercise.
Week 4		<ul style="list-style-type: none"> Increase the intensity of strengthening exercises and begin more complex movements like squats, hip bridges and bridge walk outs. Begin balance exercises like single-leg stance. You may begin low impact aerobic exercise (e.g., walking, elliptical machine) with no incline and low resistance. Progress as you can tolerate under the guidance of your care team.
Week 5		<ul style="list-style-type: none"> Progress intensity of strengthening exercises and balance exercises. Increase intensity of low impact aerobic exercise (eg, biking, swimming, elliptical, walking).
Week 6		<ul style="list-style-type: none"> Progress strength exercises as directed by your care team. Continue to increase intensity of low impact aerobic exercise, but no running.
Week 7		<ul style="list-style-type: none"> Once you are working hard at the activities above without pain, progress to higher impact activities (like jogging, running, sprinting and jumping) as directed by your care team. For runners, begin using the anti-gravity treadmill.

Discomfort

Some pain after your procedure is expected for the first few weeks. Use an ice pack on the painful area for 15 minutes as needed; in the first 2-3 days consider icing 3 times daily. If you are concerned about your pain, please contact your care team.

Dressing

- Remove dressing after 24-48 hours. Replace with simple bandage.
- Sterile strip bandages can be removed when they begin peeling off or after 7 days. Keep bandages and procedure area clean and dry.

Bathing

Do not soak/submerge hip in water for 1 week. Showering is OK, but keep incision dry until you see your doctor for your wound check.

Follow-up Appointment

You will be scheduled for follow-up appointments approximately 1 week, 1 month and 3 months after your procedure.

When to call your provider

If you notice increasing redness, warmth, pain, fever, drainage from the wound or other problems that concern you, call Ohio State Sports Medicine (614-293-3600) during normal clinic hours. Otherwise seek care at your local emergency room.

For Therapists Only

All strength work should be performed every other day, 2-3 sets of each exercise to fatigue without reactive pain. Manual work may begin 2 weeks after the procedure date.

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