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SI-Joint Fusion Post-Operative Physical Therapy Instructions

Phase 1 Objectives: Pain control and promote healing: Emphasize weight-bearing limitations and adherence to cautious, midrange ROM. Precautions: Avoid hip adduction across the midline. Do not perform repetitive straight leg raise flexion motions.		
Time Span	0-3 weeks	
Weight Bearing (WB)	- Limit to ≤25% of WB.	
Parameters	- Use crutches or walker if necessary.	
ROM Limits	- Within a comfortable range.	
	- Avoid maximum hip flexion, adduction, and IR.	
	- Begin prone lying.	
Prophylactic (preventative)	- PROM, flexibility, and isometric contractions of core and lower extremities.	
and Therapeutic Exercises	- Max 8-10 lbs. lifting restriction.	
	- No operating a motor vehicle for 1 week.	
	- Avoid stairs if possible.	
	- Ambulate per PT discretion, always lead with the dominant leg.	
	- Limit ambulation to ≤1hour/day for 4 days postoperatively.	
	- Demonstrate TA activation with holding for 10 sec. prior to beginning Phase 2.	
	- Schedule a physical therapy follow up appointment at 3 weeks postoperatively to	
	address removing WB limitations. Review and adjust home rehabilitation program.	

Phase 2

Objectives: Extend ROM. Initiate basic exercises to improve core and lower extremity strength. Progress to WBAT. Precautions: Avoid reaching the limit of hip adduction, flexion, and IR. Establish and maintain proper gait mechanics with progression of weight bearing, do not push limits. Only use exercises that are pain-free. Focus on engaging the core to minimize low back strain with exercise/activity.

Begin hip strengthening flexor with supine marching from hooklying position and progress to SLR.		
Time Span	3-6 weeks	
Weight Bearing (WB) Parameters	- Utilize PWB with emphasis on progressing to WBAT. Can begin use of SEC, single crutch.	
ROM Limits	Avoid maximal hip flexion, adduction, and IR.Progress lumbar extension positioning.	
Prophylactic (preventative) and Therapeutic Exercises	 Utilize beginner core stabilization and mat exercises. Focus on hip strengthening. Max 10 lbs. lifting restriction. Unrestricted ambulation with the use of an assistive device (walker/crutch). Minimize scar tissue formation through the gluteus maximus and deep external hip rotators; scar tissue mobilization. Layer II-III pirformis release as needed. Demonstrate hip extension, abduction, and flexion strength ≥4/5. Schedule physical therapy follow up appointment at 6 weeks, following appointment with MD. Progress to basic intermediate core strengthening, proprioceptive training, and review of gait kinematics once cleared by MD. 	

Phase 3

Objectives: Normalize gait mechanics and safety with stairs/transfers. Initiate 2 leg CKC lower extremity strengthening protocol. Add proprioceptive training and progress to intermediate core exercises.

Precautions: Only participate in pain-free exercises. Limit excessive stair climbing, end range squatting and bending, and step aerobic activity.

Time Span	6-8 weeks
Weight Bearing (WB) Parameters	- WBAT. Wean off of assistive devices (walker/cruthes) as long as pain free. Normalize gait mechanics.
ROM Limits	- Achieve end range hip mobility. Progression towards lumbar mobility under flexion/extension.
Prophylactic (preventative) and Therapeutic	 Beginner cardio exercises (walking, elliptical, swimming, jogging, upright biking). Intermediate 2 leg CKC strength and basic weight room strength. Intermediate exercises: mat/core and proprioception.
Exercises	- Begin to advance lifting restrictions as patient and mechanics tolerate.

Phase 4

Objectives: Restore core and lower extremity strength to full levels. Progress CKC activities. Improve multidirectional control with CKC activity.

Precautions: Closely monitor symptom regression with advancement of exercises and activities.

No running or plyometric activity until 3 months postoperatively. MD will review long term restrictions based on progress.

Time Span	8-12 weeks
Weight Bearing (WB)	- FWB.
Parameters	
ROM Limits	- WNL.
Prophylactic	- Begin advanced 2 \rightarrow 1 leg CKC strengthening activity.
(preventative) and	- Participate in advanced core and advanced proprioception.
Therapeutic Exercises	- Intermediate cardio activity.
	- Initiate weight room return to fitness objective.
	- Review and assess occupational demands, and return to work activity.