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IT Band Tendinopathy Rehabilitation Protocol

GOALS:

- Reduce pain/inflammation/ecchymosis
- Maximize ROM/flexibility/soft tissue mobility of ITB and surrounding structures
- Maximize strength of hip/thigh/core musculature
- Normalize gait pattern with/without assistive device
- Educate client in home exercise program and self-management techniques
- Return to ADL's/recreational/occupational activities

PHASE I – Maximal Protection Phase

- Use assistive device as necessary to normalize gait pattern
- Anti-inflammatory/pain modalities to iliotibial band (at hip or knee)
- Flexibility exercises for ITB, HS, Quadriceps, Piriformis, TFL etc.
- Low impact, Non-painful core strengthening
- Isometrics for hip PRN to modulate pain
- Advise in ADL's/home exercise program/self-management techniques

PHASE II – Moderate Protection Phase

- D/C assistive device when gait pattern has normalized
- Continue anti-inflammatory modalities prn
- Begin soft tissue massage as indicated (cross friction, foam roller, etc); In clinic and at home
- Progress ROM exercises/flexibility exercises (passive stretch→contract/relax)
- Initiate strengthening (emphasize thigh and hip strengthening with proper form in closed chain)
- Initiate endurance exercises:
- Stationary cycling (high seat, low resistance)
- Swimming
- Stairmaster
- Treadmill

PHASE III – Minimal Protection Phase

- Continue ROM and flexibility exercises
- Progress strengthening as tolerated

- Progress endurance activities and begin form running/jogging as tolerated
- Initiate agility/plyometric/return to sport program
- Evaluate running/sport mechanics as it relates to ITB tendonitis
- Educate client in HEP and appropriate time-table for return to sport/recreational/occupational activities