

Post-op Iliac Angioplasty Return to Sport Plan

Week	Goals	ADLs	Exercises	Precautions	Exit criteria
Phase 1					
Week 1	Manage pain, swelling, and wound healing	Complete rest, lay horizontal, walking in home, some stairs.	Diaphragmatic breathing and lateral costal breathing in crook lying and 4-point kneeling, 3–5 breaths, 3 sets, 3×/day. Ankle pumping: 10 × 3 sets, 3×/day.	No school 2 weeks post-op No bicycle No outside work Infection Light-headed Pain and oedema Cough, sneeze Fatigue Elevated blood pressure Bleeding, haematoma Heavy lifting Valsalva ROM (hip ≤ 90°)	2 weeks post-op Wound healing adequate Infection absent Pain and oedema managed Full weight bearing Successful ADLs

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Phase 2					
Week 3	Improve walking tolerance Walk around neighbourhood Stairs Return to ADLs Return to school/work	Resume school and socialising outside the house. Walking activities encouraged.	Light walking around the neighbourhood up to 20 min Normalise gait pattern on the stairs AROM in supine Breathing exercises continued Scar work, gentle self-massage	No isometric exercises Continue to monitor incision No elevation of blood pressure No lifting or carrying No Valsalva No hip ROM past 90° flexion, rotation ok	Incision healing well Normal gait pattern on stairs and walking Adequate energy balance
Week 4	As above	As above	Begin isometric quad, hamstring, adductor, and glute exercises Light walking up to 30 min	As above, minus isometrics	Adequate isometric muscle activation on demand Comfortable light walking and stairs up & down

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Phase 3				
Week 5	Resume light aerobic work	30-45 min walk/hike outside daily, mostly flat On bike (3 days/week, alternating on/off): 30 min trainer ride, Zone 1 Alternating days: walk/hike Light strength (3 days/week can be on bike days or off days): Glute bridges Hip abduction in side-lying 4-point kneeling hip extension Banded supine lat pulldown (on floor in crook lying) Calf raises Balance	HR remains under 120 bpm BP remains under 140 mmHg systolic Upright bike set-up should be MTB, gravel, or flip bars upside down 1 day rest between trainer rides Ensure good breath work with strength exercises (no Valsalva) Make note of any familiar FLIA symptoms, control symptoms, don't allow to accumulate (note: it is expected to feel some symptoms, some of the time as you are recovering. But not severe symptoms all of the time)	Comfortable and pain-free trainer rides (some discomfort ok) Able to perform strengthening exercises with no elevation of BP (to be monitored in physiology clinic)
Week 6	Increase activity tolerance Improve functional strength	As above Progress 30-45 min duration Trainer rides in Zone 1-2	As above	Comfortable and pain-free trainer rides Able to perform strengthening exercises with no elevation of BP (to be monitored in physiology clinic)

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Phase 4				
Week 7 to 8	Progressive increase in efforts on the bike trainer	Walking daily; can introduce longer walks/hikes 1-2 hrs, 1-2/wk, over more hilly terrain as tolerated On bike (3 days/week alternating on/off): Progress 60-90 min in Zone 1-2 Progress 0-3x 15 min intervals in Zone 3, per ride Light strength (3 days/week): Glute bridges with marching Side plank 4-point kneeling hip extension (pulley resistance) ½-kneeling banded lat pulldown Seated banded row Body-weight squat Balance with dumbbell transfer Standing 2-foot Pallof press Familiar FLIA exercises as above	Maintain upright cycling posture on road bike (hands on tops) Gradual increase in HR, progressive efforts Make note of any familiar FLIA symptoms, control symptoms, don't allow to accumulate (note: it is expected to feel some symptoms, some of the time as you are recovering. But not severe symptoms all of the time)	Able to maintain breath while performing strength exercises WEEK 8 Assess BPs & ABI rest & post-exercise 50x body-weight squat test

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Phase 5				
Week 9 to 12	May resume training outside on gravel/road bike	On bike (4-5 days/week; 2-on, 1-off): Progress up to 10 hrs/wk Progress 90-120 min in Zone 1-2 Up to 3x 15 min intervals in Zone 3 OR Up to 3x 10 min intervals in Zone 4 Progress to 60 min riding outside, upright road/gravel position Progress to 2/day 60 min trainer, then to 1/day 120 min trainer Stretches: Figure 4 Standing hip extension Cat cow Thread the needle Hamstring Light strength (3 days/week): Banded monster walks DB split squat Arms-elevated push-up Goblet squat SL RDL with dumbbell Split-stance Pallof press	Hands on the tops or hoods Gradual increase in HR, progressive efforts Monitor symptoms	Able to maintain breath while performing strength exercises WEEK 12 Repeat provocative cycling FLIA assessment in lab with ABI and NIRS

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Phase 6				
Week 13 to 16	Continue training on gravel/road bike Return to regular training structure under coach	Progress toward full cycling training volume; 15 hrs/wk on bike On bike (5-7 days/week): Progress 2-3 hrs/day Mix trainer & outside Progress to 2/day 90+ min Initially work on volume. Add intensity with shorter intervals & longer rests (e.g. 1:1 or 1:2 work:rest) Up to 3x 5 min Zone 5 Stretches: Specific to the needs of the athlete, prescribed by S&C Light strength (3 days/week): Re-introduce valsalva, practice isometric under heavier loads Barbell squats Barbell step-up Push-ups from floor Core exercises	May begin training in the drops or TT bars on trainer Valsalva now permitted Monitor symptoms	Able to tolerate near-full training load with no symptoms accumulation Adequate energy balance