

Anterior Stabilization (Capsulorrhaphy with or without labral repair) Postoperative Shoulder Protocol

Basic guidelines

1. Scapular control should be the primary focus!
2. Sling is worn 3-4 weeks, Immobilizer at night - avoid internal rotation position.
3. No lifting with operated arm for 6 weeks.
4. No external rotation in adduction past neutral for 2 weeks.
5. External rotation to 45° in scapular plane after 2 weeks.
6. Elevation in the scapular plane or forward flexion.
7. Avoid combined abduction and external rotation for 6 weeks.
8. Work towards full ROM starting at 6 weeks.
9. The sequence of progression is more important than the time of progression

Acute Phase (0 to 4 weeks postoperative)

RANGE OF MOTION

- Sling during day, immobilizer @ night in the neutral position (scaption)
- AAROM in scaption/FF with good scapular control
- Closed chain bowing & pendulums
- Passive towel slides or chair roll with elbow in scaption & FF
- ER in ADD to neutral and 45° in scaption
- Elbow & wrist flexion/extension
- Codman's for shower to wash axilla
- Soft tissue work by PT (especially anterior structures, thoracic mobilization, and postural education)
- OK to use hand from eyes to thighs

STRENGTH

- Focus on correct scapular position, may have to manually cue patient
- Sternal lift, scapular squeeze (retraction/depression) and scapular clocks
- Lawnmower starts
- Basic lumbopelvic and core strengthening (step-ups, lunges, grid lunges, etc in sling)
- Gentle active humeral head depression (ball/table)
- Isometric extension (low row)

CARDIOVASCULAR

- Treadmill, recumbent bike, stair master and elliptical trainer with sling

Recovery Phase (4 to 8 weeks postoperative)

RANGE OF MOTION

- Discontinue sling @ 4 weeks except for crowds/school
- AAROM/AROM for FF & scaption, ER in scaption
- Towel slides & closed chain bowing with trunk rotation (FF, ABD, scaption, horizontal ABD & ADD)
- Pendulums
- Swiss ball rolls, advance to ball/wall rolls
- Assisted wall slides

STRENGTH

- Continue & progress scapular stabilization program
- Advance kinetic chain strengthening. Adding reach & punch in FF & scaption with lunges (Fencing)
- Closed chain inferior humeral head glide @ 90°
- Ball table rolls to ball wall rolls
- Weight bearing table rocking (weight shifts: lateral, forward, back, diagonals)
- Bilateral rubber tubing in ER with cervical spine in neutral
- One arm pull downs with tubing
- Isometric low row, rowing and lawnmowers all with tubing
- Standing pivot prone and prone pivot prone (robbery)
- Scapular and short range GH PNF patterns
- Wall walks
- Closed chain scapular retraction push up wall/table
- Closed chain wall slides forearms on wall
- Isometric wall angels in scaption @ 30/60/90°

CARDIOVASCULAR

- Same as protective phase without sling as tolerated

Functional Phase (8 to 12 weeks postoperative)

RANGE OF MOTION

- Reestablish normal scapulohumeral rhythm in all planes
- AROM/AAROM in all planes to regain full ROM
- Prayer stretch
- Passive stretch: especially pecs, lats, IR, ER
- Increased soft tissue work prn (pecs, lats, subscap)
- Joint mobilization prn
- Posterior capsule/cuff stretch prn (GIRD sleeper stretch)
- Wall washes

STRENGTH

- Scapular control optimized
- Progress full kinetic chain lumbopelvic/scapulothoracic/glenohumeral program.
- Reverse corner push-ups below 90° elevation
- Closed chain scapular retraction in push up position from table to floor
- Lat pull downs progress from tubing to weights
- Weight shifting: all 4's to floor progression
- Closed chain perturbations
- Side lying ER, prone ER
- Flexion and scaption raises
- Full range PNF patterns
- PNF patterns with theraband (stand, sit, prone on swiss ball)
- Seated rows with hip and lumbar flexion
- Pail dumps
- Add core stabilization to standing exercises & progress single leg → 2 legs on bubble → 1 leg on bubble

CARDIOVASCULAR

- Progress to impact (jogging @ 3 months)
- Cross country ski machine
- Swim @ 3 months if ROM and scapular mechanics are normal

Performance Phase (12-24 weeks postoperative)

RANGE OF MOTION

- ROM should be full or near full
- Soft tissue work, joint mobilizations, stretching prn
- Corner stretch, doorway stretch, GIRD side lying posterior capsule @ 70/90/120° elevation prn

STRENGTH

- Weight shifting: floor progression
- Single arm rows & pull down progression-rotation to same side, hip/knee flexion to same side, hip/knee flexion/rotation to same side, 2 legs on bubble→ 1 leg on bubble
- Push up progression (Table→floor on knees→floor on toes→abdominals on swiss ball→thighs on swiss ball→ ankles on swiss ball)
- Swiss ball weight shifting
- Swiss ball walk outs on hands progression
- Bilateral ER with theraband weight bearing on elbows
- Bilateral rows & pull downs
- Iron cross & snatch with theraband
- Add weights to step up, step down, lunge with reach and punch series
- Add weights to cuff specific exercises
- Mock throwing or tennis strokes→ to theraband→to weights
- Plyoball progression
- Ball bounce on wall→single & double arm
- Open chain perturbations
- Sport or work specific drills for endurance, quickness, agility, strength, and power
- Sport specific movement patterns (ex: swimmers prone, divers with swiss ball overhead against ceiling, step down/lunge series)