

REHABILITATION GUIDELINES AFTER ARTHROSCOPIC ANTERIOR SHOULDER STABILIZATION



Shail Vyas, MD
Orange County Orthopaedic Group
(714) 974-0100

The intent of this protocol is to provide the therapist with guidelines of the post-operative rehabilitation course after an arthroscopic posterior shoulder stabilization procedure. It should not be a substitute for one's clinical decision making regarding the progression of a patient's post-operative course based on their physical exam findings, individual progress, and/or the presence of post-operative complications. The therapist should consult the referring physician with any questions or concerns.

FREQUENCY: Weeks 0-4: 3x/week. Weeks 4-12: 2x/week. Weeks 12-16: 1x/week. Weeks 16-24: 1x/2 weeks.

INDIVIDUAL CONSIDERATIONS:

PHASE I (0-2 weeks)

Goals

- Control inflammation and pain
- Use Cryocuff 3-4 times per day

- Increase PROM

Sling

- Wear ER brace continuously (except for therapy and showering) for 4 weeks

Therapeutic Exercises

- PROM/AROM of elbow and wrist only
- Ball squeezes
- PROM of shoulder
 - 90 degrees forward flexion
 - 0 degrees of external rotation
 - IR to posterior belt line

PHASE II (2-4 weeks)

Goals

- Full, painless PROM in forward flexion and internal rotation
- 30 degrees of external rotation

Sling

- Use sling for 4 weeks continuously except for shower and therapy
- Begin weaning 4-6 weeks

Therapeutic Exercises

- PROM
 - Full forward flexion
 - External rotation at the side to 30 degrees maximum
 - Full internal rotation

PHASE III (4-6 weeks)

Criteria

- Full passive internal rotation and forward flexion

Goals

- External rotation to 45 degrees

- AROM to PROM parameters

Therapeutic Exercise

- PROM/AROM
 - Full forward flexion
 - Full internal rotation
 - 45 degrees of external rotation
- Begin posterior capsular stretching
 - Cross arm stretch
 - Side lying internal rotation

PHASE IV (6-12 weeks)

Criteria

- Full, painless PROM and AROM in forward flexion and internal rotation

Goals

- Maintain full PROM and AROM in forward flexion and internal rotation
- Increase external rotation
- Optimize neuromuscular control
- Progress with strengthening
- Gradual return to full functional activities
- Avoid excessive anterior capsular stretching with overhead strengthening

Therapeutic Exercises

- Increase active and passive external rotation at the side to full by 8 weeks
- Continue with posterior capsular stretching
- Initiate strengthening program
 - Shoulder shrug
 - Seated row
 - Biceps curls
 - Lat pulls (in front of head)
 - Triceps extension
- May begin internal and external rotation in the 90/90 position at 8 weeks

PHASE V (12-24 weeks)

Criteria

- Full, painless PROM and AROM in all planes

Goals

- Maintain full PROM and AROM
- Progress with strengthening
- Return to recreational activities at 3 months
- Return to overhead sports and contact activities at 5-6 months
- Begin weight lifting, avoiding stress to anterior capsule

Therapeutic Exercises

- Continue with passive stretching as needed to maintain full PROM
- Progress with strengthening
 - May begin incline bench pressing with narrow grip, low weight, high repetitions, AVOID WIDE GRIP!
 - No military or lat pulls behind head!! Always be sure to have elbows in front of body

Return to Sports

- May return to sports at 5-6 months when ROM is symmetric and painless
- Strength is 90% of contra-lateral side
- No pain or apprehension in 90/90 position