



Phase I – Immediate Post Surgical Phase (Day 1-21):

Goals:

- Immobilization to protect repair
- Diminish pain and inflammation

Precautions:

- Remain in sling, only removing for showering (after first post operative visit) and elbow/wrist ROM
- No Passive Range of Motion (PROM)/Active Range of Motion (AROM) of shoulder
- No lifting of objects with operative shoulder
- Keep incisions clean and dry

Week 1-3:

- Sling at all times
- PROM/AROM elbow and wrist only
- Ball squeezes
- Sleep with sling supporting operative shoulder
- Shower with arm held at your side
- Cryotherapy for pain and inflammation
- Patient education: posture, joint protection, positioning, hygiene, etc.
- Begin isometrics week 3

Phase II – Protection Phase/PROM (Week 4 and 5):

Goals:

- Gradually restore PROM of shoulder
- Do not overstress healing tissue

Precautions:

- Follow surgeon's specific PROM restrictions- primarily for external rotation
- No lifting
- No PROM/stretching of the anterior capsule in the 90/90 positions.

Criteria for progression to the next phase:

- 90 degrees flexion and full internal rotation PROM
- PROM 30 degrees of external rotation at the side

Week 4-5

- Continue use of sling
- PROM - Gradual
 - 90 degrees flexion
 - Full Internal rotation
 - External rotation to 30 degrees
- Pendulums
- Continue cryotherapy as needed
- Continue all precautions and joint protection

Phase III – Intermediate phase/AROM (Week 6 and 7):

Goals:

- Continue to increase external rotation PROM gradually to 45 degrees
- Full AROM flexion and internal rotation
- Independence with ADL's

Precautions:

- Wean from Sling
- No lifting with affected arm

Week 6 and 7

- AROM of shoulder
 - Progress to full AROM in the against gravity position flexion and internal rotation
- Begin incorporating more aggressive posterior capsular stretching
 - Cross arm stretch
 - Side lying internal rotation stretch
 - Posterior/inferior gleno-humeral joint mobilization
- Begin gentle rhythmic stabilization techniques for rotator cuff musculature strength
- Continue cryotherapy as necessary

Phase IV - Strengthening Phase (Week 8 – Week 12)

Goals:

- Continue to increase external rotation PROM gradually
- Maintain full non-painful AROM
- Improve muscular strength, stability and endurance
- Gradual return to full functional activities

Precautions:

- Be sure not to stress the anterior capsule with aggressive overhead strengthening
- Can begin gentle external rotation stretching in the 90/90 position
- Avoid contact sports/activities

Week 8-10

- Continue stretching and PROM
- Rhythmic stabilization exercises
- Can begin gentle external rotation stretching in the 90/90 position
- Initiate strengthening program (elastic resistance)
 - ER/IR with elbow at the side of the body
 - Forward punch
 - Seated row

Week 8-10 (cont'd)

- Initiate strengthening program (elastic resistance) (cont'd)
 - Shoulder shrug
 - Seated row
 - Bicep curls
 - Lat pulls
 - Tricep extensions
 - Push-up plus

Week 10-12

- Continue stretching and PROM
- Continue all exercises listed above
- Begin gentle strengthening overhead, avoiding excessive anterior capsule stress
 - ER/IR in the 90/90 positions
 - D1/D2 flexion and extension diagonals

Phase V – Return to activity phase (Week 12 - Week 20)

Goals:

- Gradual return to strenuous work activities
- Gradual return to recreational activities
- Gradual return to sports activities

Precautions:

- Do not begin throwing, or overhead athletic moves until 4 months post-op
- With weight lifting:
 - Avoid wide grip bench press
 - No military press or lat pulls behind the head. Be sure to “always see your elbows”

Week 12-16

- Continue stretching and strengthening
- Can begin golf, tennis (no serves until 4 mo.), etc.
- Can begin weight lifting with low weight, and high repetitions, being sure to follow weight lifting precautions.

Week 16-20

- May initiate interval sports program if appropriate