

Chase D. Smith, MD

Phase I - Immediate Post-Surgical Phase (Day 1-10)

Goals: Maintain Integrity of the Repair

Gradually Increase Passive Range of Motion

Diminish Pain and Inflammation Prevent Muscular Inhibition

No overhead movement/lifting for 4-6 weeks

Passive motion only – DO NOT let arm drop completely to the side for 4 weeks

Day One to Six:

- Sling or abduction pillow for protection except for rehab exercises 2-4 weeks
- Pendulum Exercises 4-8x daily (flexion, circles)
- Active Assisted ROM Exercise (L-Bar)
 - ER/IR in Scapular Plane
- Passive ROM
 - Flexion to tolerance
 - ER/IR in Scapular Plane
- Elbow/Hand Gripping & ROM Exercises
- Submaximal & Painfree Isometrics
 - Flexion
 - Abduction
 - External Rotation
 - Internal Rotation
 - Elbow Flexors
- Cryotherapy for Pain and Inflammation
 - Ice 15-20 minutes every hour
- Sleeping
 - Sleep in Sling or abduction pillow

Day Seven to Ten:

- Continue Pendulum Exercises
- Progress Passive ROM to Tolerance
 - Flexion to at least 115 degrees
 - ER in Scapular Plane to 45-55 degrees
 - IR in Scapular Plane to 45-55 degrees
- Active Assisted ROM Exercises (L-bar)
 - ER/IR in Scapular Plane
 - Flexion to Tolerance*

*Therapist Provides Assistance by Supporting Arm

- Continue Elbow/Hand ROM & Gripping Exercises
- Continue Isometrics
 - Flexion with Bent Elbow
 - Extension with Bent Elbow
 - Abduction with Bent Elbow
 - ER/IR with Arm in Scapular Plane
 - Elbow Flexion

Biceps Tenotomy/Tenodesis Precautions

- No active biceps x 8 weeks
- o No heavy lifting or jerking



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- May initiate ER/IR tubing at 0 degrees Abduction, if patient exhibits necessary AROM
- Continue Use of Ice for Pain Control
 - Use Ice at least 6-7 times daily
- Sleeping
 - Continue Sleeping in Sling or abduction pillow

Precautions:

- 1. No Lifting of Objects
- 2. No Excessive Shoulder Motion Behind Back
- 3. No Excessive Stretching or Sudden Movements
- 4. No Supporting of Body Weight by Hands
- 5. Keep Incision Clean & Dry

Phase II - Protection Phase (Day 11 - Week 5)

Goals: Allow Healing of Soft Tissue

Do Not Overstress Healing Tissue

Gradually Restore Full Passive ROM (Week 2-3)

Re-Establish Dynamic Shoulder Stability

Decrease Pain & Inflammation

Day 11 – 14:

- Passive Range of Motion to Tolerance
 - Flexion 0-145/160 degrees
 - ER at 90 degrees abduction to at least 75-80 degrees
 - IR at 90 degrees abduction to at least 55-60 degrees
- Active Assisted ROM to Tolerance
 - Flexion
 - ER/IR in Scapular Plane
 - ER/IR at 90 degrees Abduction
- Dynamic Stabilization Drills
 - Rhythmic Stabilization Drills
 - ER/IR in Scapular Plane
 - Flexion/Extension at 100 degrees Flexion
- Continue Isotonic ER/IR with Tubing
- Initiate Active Exercise Prone Rowing & Elbow Flexion
- Initiate Active Exercise Flexion & Abduction (Day 15)
- Continue Use of Cryotherapy

Discontinue use of Sling/Abduction Pillow at Week 2-4



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Week 3 - 4:

- Patient should exhibit full passive range of motion, nearing full active range of motion
- Continue all exercises listed above
- Initiate Scapular Muscular Strengthening Program
- Initiate Sidelying ER Strengthening (Light Dumbbell)
- Initiate Isotonic Elbow Flexion
- Continue use of ice as needed
- May use pool for light ROM exercises

Week 5:

- Patient should exhibit full active range of motion
- Continue AAROM and Stretching exercises
- Progress Isotonic Strengthening Exercise Program
 - ER Tubing
 - Sidelying ER
 - Prone Rowing
 - Prone Horizontal Abduction
 - Shoulder Flexion (Scapular Plane)
 - Shoulder Abduction
 - Biceps Curls

Precautions:

- 1. No Heavy Lifting of Objects
- 2. No Supporting of Body Weight by Hands & Arms
- 3. No Sudden Jerking Motions

Phase III - Intermediate Phase (Week 6-12)

<u>Goals</u>: Gradual Restoration of Shoulder Strength & Power Gradual Return to Functional Activities

Week 6:

- Continue Stretching & PROM (as needed to maintain full ROM)
- Continue Dynamic Stabilization Drills
- Progress Isotonic Strengthening Program
 - ER/IR Tubing
 - ER Sidelying
 - Lateral Raises
 - Full Can in Scapular Plane
 - Prone Rowing
 - Prone Horizontal Abduction
 - Prone Extension
 - Elbow Flexion
 - Elbow Extension



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• If physician permits, may initiate light functional activities

Week 8-10:

- Continue all exercise listed above
- Progress to Independent Home Exercise Program (Fundamental Shoulder Exercises)
- Initiate Interval Golf Program (Slow Rate of Progression)

Phase IV - Advanced Strengthening Phase (Week 12 - 20)

Goals: Maintain Full Non-Painful Active ROM
Enhance Functional Use of UE
Improve Muscular Strengthen & Power
Gradual Return to Functional Activities

Week 12:

- Continue ROM & Stretching to maintain full ROM
- Self Capsular Stretches
- Progress Shoulder Strengthening Exercises
 - Fundamental Shoulder Exercises
- Initiate Swimming or Tennis Program (if appropriate)

Week 15:

- Continue all exercises listed above
- Progress Golf Program to playing golf (if appropriate)

Phase V – Return to Activity Phase (Week 20 - 26)

<u>Goals</u>: Gradual Return to Strenuous Work Activities Gradual Return to Recreational Sport Activities

Week 20:

- Continue Fundamental Shoulder Exercise Program (at least 4 times weekly)
- Continue Stretching, if motion is tight
- Continue Progression to Sport Participation