

ARTHROSCOPIC SHOULDER SURGERY REHABILITATION PROTOCOL

Anterior and Posterior Labral Repair and Capsulorraphy

GENERAL GUIDELINES

- The local anesthetic (similar to novacaine) in your shoulder will last 6-12 hours
 - Start taking the pain medication as soon as you start feeling pain
- Vistaril may be taken every 6 hours as needed for nausea, itching, or trouble sleeping
- Use cryotherapy continuously for the first 72 hours, then after exercises thereafter
 - Ensure that the cryotherapy cuff never contacts the skin directly
 - Apply to the shoulder after performing rehab exercises for the first 12 weeks
- Remove the bandage 72 hours after surgery, but leave the white steritrips on the skin
 - Apply fresh gauze pad or bandaid to any incision that is moist or weeping
- You may shower after dressing removal as long as the incisions/steristrips are dry
 - All incisions must be completely dry for 24 hours before getting wet in shower
 - Do NOT submerge the shoulder underwater for the first 6 weeks
- The sling is for comfort and to protect the repair.
 - Wear the sling for the first 4 weeks, removing it for exercises and showers
 - Wear the sling when out of the house for the first 6 weeks
- Protect the shoulder while getting dressed, keeping the arm close to your side
 - choose loose, comfortable clothing that is easy to put on and take off
 - the operative arm should go in first when putting on a shirt, and should come out last when taking off a shirt.
- Schedule a follow-up appointment for one week after surgery 410-448-6400

PHASE I

Begins immediately post-op through the first postoperative visit (2 weeks)

Goals:

- Protect the shoulder and minimize inflammation
- Ensure skin healing and initiate early range of motion

Sling:

- Wear the sling full-time, removing only for shower and exercises
- May type or write in the sling, but no holding or carrying anything heavier than a pen.

Therapeutic Exercises (remove sling to perform 2 times per day):

- Adducted external rotation stretching. Use the normal arm to passively rotate the hand/arm on the surgical side to the outside (away from the belly), with a limit of 30 degrees. (0 degrees is the hand pointed directly in front).

PHASE II

Begins 2 weeks postoperatively and extends to 4 weeks postoperatively

Goals:

- Protect the shoulder and the repair
- Regain shoulder motion

Sling:

- Wear the sling full-time, removing only for shower and exercises
- May type or write in the sling.
- No holding/carrying anything heavier than a pen/pencil

Therapeutic Exercises (3 times per day):

- All exercises from phase I
- Adducted external rotation stretching, to a limit of 50 degrees
- Active-assisted supine forward elevation in scapular plane (limit 130 degrees)
 Maintain gentle traction to avoid posterior pressure from the weight of the arm
- Scapular retractions
- NO internal rotation or adduction.

PHASE III

Begins 4 weeks postoperatively and extends to 8 weeks postoperatively

Goals:

- Protect the repair
- Improve range of motion
- Progress to active range of motion while minimizing inflammation

Sling:

- Discontinue the sling at home after 4 weeks
- Wear the sling at night and outside of the home for the first 6 weeks

Activities:

- No lifting or carrying anything heavier than a cup of coffee or can of soda

Therapeutic Exercises (2 times per day):

- All exercises from Phase II, no limits as tolerated
- Supported active adducted shoulder rotation.
- Behind-the-back internal rotation stretching
- Upright active-assisted forward elevation (may use pulley for assistance)
- Active prone elevations (forward, scapular-plane, and extension)

PHASE IV

Begins 8 weeks postoperatively and extends to 12 weeks postoperatively

Goals:

- Protect the repair
- Maximize range of motion
- Initiate strengthening

Activities:

- No lifting or carrying anything heavier than 5 lbs

Therapeutic Exercises (2 times per day):

- All exercises from Phase III
- Stretching in all planes
- Cross-body stretch
- Hands-behind-head stretch
- Wall climb and stretch
- *Theraband* strengthening in all planes

PHASE V

Begins 12 weeks postoperatively until 18 weeks postoperatively

Additional criteria for advancement to Phase IV:

- Painless range of motion

Goals:

- progress early functional strengthening
- Protect the repair

Activities:

- No restrictions for daily activities.

Therapeutic Exercises (stretching every day, strengthening every other day):

- All exercises from Phase IV
- Stretching in all planes
- Progressive theraband strengthening
 - Initiate weight training with shoulders in adduction (Rows, biceps, triceps)
 - No presses, incline, pull downs, flys, or dips

PHASE VI

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Begins 18 weeks postoperatively

Goals:

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- Maximize functional strength

Therapeutic Exercises:

- All exercises from Phase V
- progressive dynamic strengthening

RETURN TO SPORT

Requires clearance from physician

Sport training/practice once shoulder at 90% of uninvolved side

- Start with 'walk-through' at < 1% of maximum effort
- Increase 10% effort each session as tolerated

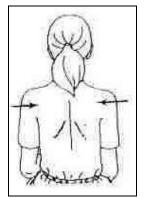
Goal of return to full participation in contact sports at 7 months

Selected Exercise Diagrams

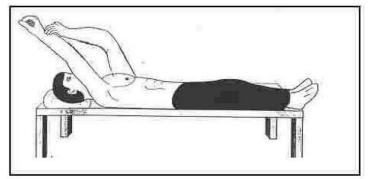
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Adducted External rotation stretching



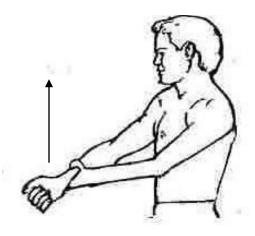
Scapular retractions



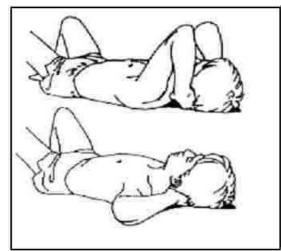
Supine active-assisted forward elevation stretching



Supported adducted active shoulder rotation

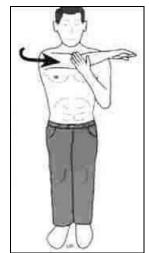


Upright active-assisted forward elevation

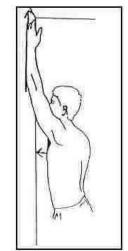


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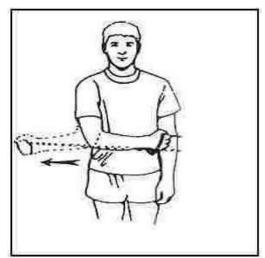
Hands-behind-head stretch (External rotation stretching in abduction)



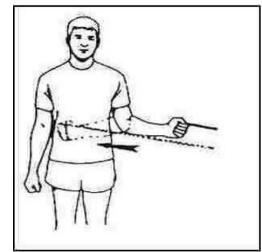
Cross-body stretching



Wall climb



Theraband external rotation



Theraband internal rotation