


These guidelines were created as a framework for the post-operative rehabilitation program. They DO NOT substitute for any specific restrictions or requirements that are determined through the necessary shared decision-making and collaboration between the operating surgeon and treating rehabilitation team.

<p><b>Shoulder Instability- Anterior Surgical Procedure</b></p>	<p>Rehab Protocol Aaron Vandenbos, MD</p> 																				
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<b>FOLLOW-UP:</b>	<ul style="list-style-type: none"> <li>- Supervised rehab: 1-2x per week</li> <li>- PT re-eval: ~10-14 days</li> <li>- Ortho re-eval: ~2 weeks and ~6 weeks</li> </ul>
<b>CRITERIA FOR PROGRESSION:</b>	<ul style="list-style-type: none"> <li>- Minimal pain 6 weeks from surgery</li> <li>- Pain-free ROM: <ul style="list-style-type: none"> <li>• FLEX 90°</li> <li>• ER: 45° in scaption</li> <li>• ABD: 90°</li> </ul> </li> </ul>

<b>PHASE 2: Generally 7-12 Weeks Post-Op</b>											
<b>GOALS:</b>	1) D/C sling 2) Achieve staged ROM goals <ul style="list-style-type: none"> <li>• ER at 45° ABD</li> </ul>										
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<b>PRECAUTIONS:</b>	- <b>DO NOT</b> perform stretching significantly beyond staged ROM goals during										

	<p>this phase</p> <ul style="list-style-type: none"> <li>- <b>NO</b> push-ups, bench press, pec flys, throwing, or overhead activities</li> <li>- <b>NO</b> running or high-impact activity for aerobic training</li> </ul>
<b>REHABILITATION:</b>	<ul style="list-style-type: none"> <li>- ROM exercises</li> <li>- Trunk stabilization (NWB)</li> <li>- Scapular strengthening emphasizing scapular retractors and upward rotators</li> <li>- Shoulder strength and endurance progression <ul style="list-style-type: none"> <li>• Continue base strengthening/isometrics as needed</li> <li>• PREs</li> <li>• Increase functional activities</li> </ul> </li> <li>- Modalities PRN</li> <li>- Cardiovascular training: continue recumbent bike; progress to elliptical (no push/pull with surgical arm) and/or treadmill walking</li> <li>- Adjunct treatments to consider: BFR on involved arm for AROM and isometric activities, dry needling, cervicothoracic manual therapy, aquatic walking with water at chest level or below (no UE movement or resistance; no swimming)</li> </ul>
<b>FOLLOW-UP:</b>	<ul style="list-style-type: none"> <li>- Supervised rehab: 2-3x per week</li> <li>- PT re-eval: ~10-14 days</li> <li>- Ortho re-eval: ~12 weeks post-op</li> </ul>
<b>CRITERIA FOR PROGRESSION:</b>	<ul style="list-style-type: none"> <li>- Pain-free ROM within stated goals</li> <li>- Achieve ROM goals to normalize AROM/PROM</li> <li>- Normal/near-normal scapular stabilization and coordination</li> </ul>

<b>PHASE 3: Generally 3-4 Months Post-Op</b>	
<b>GOALS:</b>	<ol style="list-style-type: none"> <li>1) Normalize AROM/PROM</li> <li>2) Normalize strength, endurance, neuromuscular control, and power</li> <li>3) Gradual increase of stress to capsulo-labral tissues</li> <li>4) Return to sport-specific training/practice</li> <li>5) Perform functional and kinesiological assessment (i.e. FMS)</li> <li>6) Perform initial functional testing (i.e. Closed Kinetic Chain Upper Extremity Stability Test [CKCUEST] and Upper Quarter Y-Balance Test)</li> </ol>
<b>PRECAUTIONS:</b>	<ul style="list-style-type: none"> <li>- No independent or unsupervised overhead, dynamic, resisted, or repetitive activities</li> <li>- If ROM is severely limited, consideration for surgically assisted release should be addressed at this time</li> </ul>
<b>REHABILITATION:</b>	<ul style="list-style-type: none"> <li>- Normalize ROM</li> <li>- Pain management</li> <li>- Trunk stabilization (progress to FWB)</li> <li>- Scapular strengthening emphasizing scapula control in overhead motions</li> <li>- Shoulder strengthening: continue PREs</li> <li>- Begin push-up and pull-up progression; progress as symptoms allow</li> <li>- Cardiovascular training: running progression initiated with pain-free shoulder motion <ul style="list-style-type: none"> <li>• Adjunct treatments to consider: dry needling, cervicothoracic manual therapy, and <u>A/P GH joint mobilizations</u> as indicated (not P/A)</li> </ul> </li> </ul>
<b>FOLLOW-UP:</b>	<ul style="list-style-type: none"> <li>- Supervised rehab: 2-3x per week</li> <li>- PT re-eval: 1-3 weeks</li> <li>- Ortho re-eval: after completion of Phase 3 goals</li> </ul>

<b>TESTING:</b>	<ul style="list-style-type: none"> <li>- Normalized functional assessment</li> <li>- Achieve passing score for push-ups</li> <li>- Consider baseline 90% on Upper Quarter Y-Balance Test and/or 20+ reps on CKCUEST</li> </ul>
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<b>PHASE 4: Generally 4-6 Months Post-Op</b>	
<b>GOALS:</b>	<ol style="list-style-type: none"> <li>1) Meet occupational requirements at 4-6 months</li> <li>2) Initiate/continue return to weight training program</li> <li>3) Begin sport-specific training; include initiation of throwing program for overhead athletes</li> </ol>
<b>PRECAUTIONS:</b>	<ul style="list-style-type: none"> <li>- Avoid the following: <ul style="list-style-type: none"> <li>• Wide grip pull downs</li> <li>• Behind the neck shoulder press</li> <li>• Wide grip bench press</li> <li>• Standing lateral deltoid raises</li> <li>• Overhead triceps press</li> </ul> </li> <li>- Clearance based upon strength, neuromuscular control/coordination, and functional ROM</li> </ul>
<b>REHABILITATION:</b>	<ul style="list-style-type: none"> <li>- Advanced specific, functional, and individualized training to achieve Phase 4 goals (i.e. lift, pull, carry, and climb in unloaded/loaded conditions) <ul style="list-style-type: none"> <li>• Modifications to PREs and base strengthening (manual resistance) as needed</li> <li>• Stretching</li> <li>• Soft tissue work</li> <li>• Interval throwing program (overhead athletes)</li> <li>• Return to weight room and strength training <ul style="list-style-type: none"> <li>o Full, pain-free ROM</li> <li>o Normal strength in RC and scapular muscles</li> <li>o 2-3x per week</li> <li>o High repetitions</li> <li>o Not to “muscle failure”</li> <li>o Gradual increase of stress to capsulo-labral tissues</li> </ul> </li> </ul> </li> </ul>
<b>FOLLOW-UP:</b>	<ul style="list-style-type: none"> <li>- Supervised rehab: 2-3x per week</li> <li>- PT re-eval: 2-4 weeks</li> <li>- Ortho re-eval: Upon completion of Phase 4 goals</li> </ul>
<b>TESTING:</b>	<ul style="list-style-type: none"> <li>- Repeat CKCUEST and/or Upper Quarter Y-Balance Test with &gt; 90% Limb Symmetry Index before returning to unrestricted sport activity</li> </ul>
<b>MISCELLANEOUS:</b>	<ul style="list-style-type: none"> <li>- Progress activities for return to sport/collision sports or aggressive military training based on the patient’s functional performance and endurance. This time period will be directed by the Ortho Surgeon and the Physical Therapist. This may require between 6-12 months before cleared without restrictions.</li> </ul>

Addendum:

<p><b>Shoulder Instability- Posterior Surgical Procedure</b></p>																					
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<b>SAME AS ABOVE FOR ANTERIOR SURGICAL PROCEDURES:</b>	<p><b>***NOTE: With the following changes for REHABILITATION***</b></p> <ul style="list-style-type: none"> <li>- <u>P/A GH joint mobilizations</u> only as indicated (not A/P)</li> <li>- Initiate push-up progression at 16 weeks</li> </ul>