

Postoperative Rehabilitation Arthroscopic Anterior Stabilization Repair

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Phase I: 0-1 Month

Goals:

1. Protect healing structures of anterior capsule and glenoid labrum.
2. Minimize postoperative pain and swelling.
3. Facilitate full passive range of motion of non-surgical tissue.
4. Maintain muscle activity of all non-surgical tissue.
5. Independent with Home Exercise Program.

Immobilization:

1. Patient to wear sling at all times except for hygiene and therapeutic exercise.
2. At week 4 may begin to wean use except for prolonged/fatiguing activities.

ROM:

1. Patient to progress to full passive flexion, abduction and internal rotation as tolerated.
2. External rotation limited to:
 - 30 degrees at 45 degrees abduction week 2
 - 45 degrees at 45 degrees abduction week 3
 - 45-60 degrees at 60-90 degrees abduction week 4

Modalities:

1. Cryotherapy.
2. EMS to shoulder girdle muscles as indicated.
3. Pain modification.

Exercises:

1. Elbow, wrist and hand active ROM, overhead pulleys, table slides and pendulum for PROM.
2. Clinician directed PROM and joint mobilizations Grade I-II as indicated.
3. A/AROM-wand/cane exercises all planes within limitations.
4. Submaximal shoulder isometrics in all planes, progression to scapular and rotator cuff PRE's with arm at side as tolerated.
5. No resisted shoulder elevations.

Phase II: 1-3 Months

Goals:

1. Protect healing structures of anterior capsule and glenoid labrum.
2. Facilitate full passive range of motion of all planes.
3. Maximize muscle strength of rotator cuff and scapular stabilizer muscles.
4. Maintain cardiovascular endurance.

Immobilization:

1. May discontinue use of sling as tolerated.

ROM:

1. Progress to full by 6 weeks, aggressively as needed.
2. External rotation to full at 90 abduction by week 8.

Modalities:

1. Cryotherapy.
2. Pain modification.

Exercises:

1. Overhead pulleys, wands/canes, pendulum, passive ROM as indicated.
2. Clinician directed PROM and joint mobilizations Grade II-III as indicated.
3. Progress PRE program – prone scapular stabilization program, rotator cuff strengthening/endurance.
4. Total Arm Strengthening program for maximum functional strength.
5. Aerobic conditioning as tolerated.
6. Proprioceptive Training/Neuromuscular Re-Education at week 4.

Phase III: 3 – 6+ Months

Goals:

1. Protect healing structures of anterior capsule and glenoid labrum.
2. Maximize muscle strength of rotator cuff and scapular stabilizer muscles.
3. Return to pain free functional sport and/or work activities.

Modalities:

1. Cryotherapy.
2. Pain modification.

ROM:

1. Full painfree ROM throughout, aggressively pursuing any deficits.

Exercises:

1. Progress TAS program to maximum.
 - a. Begin throwing program and/or overhead functional activities when internal rotation/external rotation strength at desired Tq/BW goals.
2. Closed chain/push up progression.

Strength Testing:

1. Isokinetic testing internal rotation/external rotation 60° and 180°/sec. beginning at 3 months post op.
 - a. Desired goals: 25-30% Tq/BW internal rotation and 15-20% Tq/BW external rotation.
2. Continue testing monthly until goals met.

Return to Sport/Function:

1. Strength goals met.
2. Functional Progression and/or Work Hardening completed.
3. Throwing Program at 6 month post op. No mound throwing before 7 months post op and completion of full functional progression.