

POSTERIOR SHOULDER INSTABILITY REPAIR Rehabilitation Protocol

General Information

Immobilization for 4-6 weeks in UltraSling

- Four weeks for traumatic injuries, acute conditions, no evidence of generalized ligamentous laxity, and those with predisposition to form abundant scar tissue
- Six weeks for atraumatic injuries, evidence of generalized ligamentous laxity

Protect posterior capsule by avoiding extremes of internal rotation.

Immobilization is removed for gentle passive ROM exercises

- Progression is limited based on above criteria but 90° forward flexion and external rotation to 0° by 4 weeks postop

Return to sports: 12 months for throwing athletes; 9-12 months for power athletes and contact athletes; 8-12 months for non-contact athletes.

4-6 weeks postop

- Discontinue UltraSling
- Progress with gentle PROM exercises
- Institute gentle, pain-free passive internal rotation; avoid extremes of internal rotation
- Begin AAROM exercises, periscapular strengthening with shoulder shrug exercises, and isometric internal and external rotation with the arm at the side and elbow flexed at 90° according to patient's tolerance

6-8 weeks postop

- Advance passive and active assisted ROM
- Begin active external rotation with surgical tubing
- Continue passive internal rotation, followed by active internal rotation in supine position with arm at the side and elbow flexed at 90°
- Active shoulder flexion as tolerated and shoulder abduction to 90° allowed

2-3 months postop

- ROM and mobilization progressed to achieve full PROM and AROM
- Institute stretching exercises for anterior and posterior capsule
- Continue isotonic strengthening with emphasis on the rotator cuff and posterior deltoid. Add proprioceptive neuromuscular facilitation of upper extremity patterns
- Begin active internal rotation strengthening with surgical tubing
- Horizontal abduction may be increased to include beginning from a starting position at 90° of horizontal adduction

4 months postop

- Continue strengthening with resisted free weights, concentration on eccentric rotator cuff strengthening
- Add isokinetic strengthening and endurance exercises for shoulder internal/external rotation, with arm at the side, and horizontal abduction exercise

5 months postop

- Advance isotonic and isokinetic exercises
- Continue eccentric rotator cuff strengthening and total body conditioning

6 months postop

- Post-surgery isokinetic testing is performed. Begin sports-specific program when able to achieve at least 80% strength and endurance compared with uninvolved side