

## DR. HENNIGAN

## POSTERIOR SHOULDER STABILIZATION

09/28/2020

# 0-2 WEEKS POSTOP (no formal therapy):

## **GOALS:**

- To protect the repair
- Patient to be compliant with prescribed activity modification, precautions, and home exercise program to allow for proper healing of repaired tissue.
- Promote healing and wound closure without infection.

#### SLING:

Shoulder immobilizer with pillow worn continuously, except for hygiene

#### **EXERCISES:**

• Initiate elbow, forearm, wrist ROM, grip strengthening allowed

## PRECAUTIONS:

No shoulder ROM

## 2-6 WEEKS POSTOP:

#### SLING:

• Shoulder immobilizer with pillow worn continuously, except for hygiene and exercises. May discontinue at 6 weeks.

#### **EXERCISES:**

- Initiate PROM and AAROM
  - 2 weeks: Flexion to 90, ER to neutral with arm at side
  - 4-6 weeks: Flexion to 120, ER to 20, abduction to 90
- Initiate isometrics to RTC but NOT for ER or IR
  - Week 4: isometrics to scapular stabilizers while in sling

#### PRECAUTIONS:

- No combined abduction and ER
- No IR or ER isometrics

# **6-8 WEEKS POSTOP:**

## SLING:

May discontinue at 6 weeks.



## **EXERCISES**:

- Progress PROM to full range, limiting IR at 45 degrees ABD to 30 until 10 weeks
- Initiate AROM in all planes
- Isometrics in all directions
- Clear for joint mobilization (no anterior glides)
- Clear for isotonic strengthening at 8 weeks

#### PRECAUTIONS:

• Respect pain, no posterior stress

# 8-10 weeks WEEKS POSTOP:

## **EXERCISES**:

- Continue to limit IR at 45 degrees ABD to 30 until 10 weeks
  - At 10 weeks, can progress IR to pull range
- Initiate joint mobilization (no posterior glides) as needed
- Initiate isotonic strengthening at 8 weeks

#### **PRECAUTIONS:**

• Respect pain, no posterior stress

**10+ WEEKS POSTOP**: Progress as tolerated