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POSTERIOR SHOULDER

STABILIZATION

POSTOPERATIVE REHABILITATION

GENERAL GUIDELINES

Stage 0

1. Patient immobilized in sling 1-2 weeks, sleep up to 4 weeks
2. **Avoid GH Adduction, IR, and Horz. Adduction position for 10 weeks post-op (reaching to opposite shoulder). Also, avoid posterior glide activities for 10 weeks (i.e. 4pt)**
3. Patient performing **HMP**: Pendulums, elbow and wrist AROM, and cervical ROM exercises
4. **START PT PER PHYSICIAN (see script)**
 - A. **Arthroscopic stabilization: AROM Emphasized**
 - B. **Open stabilization: PROM and AAROM Emphasized**

Stage 1 (1-3 weeks):

1. AROM, AAROM if needed (pulley and cane)
 - a. Flexion to 90 degrees
 - b. ER at 30 to 45 degrees abd to 25-30 degrees of (in scapular plane)
 - c. IR at 30 to 45 degrees abd to 20 degrees
2. Shoulder isometrics-submaximal contraction (50%)
 - a. Flex, Abd, Ext, and ER directions in neutral position
3. Elbow and wrist PRE's

4. Scapular exercises (sidelying scap faciliatation-protraction, retraction, depression, and elevation)
5. Closed kinetic chain exercises-standing wt. shifts
6. Cryotherapy and modalities PRN

Stage 2 (3-6 weeks)

1. AROM, AAROM if needed (cane and pulley)
 - a. Flexion to 120-140 degrees
 - b. Abduction 90 degrees
 - c. IR at 45 degrees abduction to 35 degrees (IR and Add to stomach) ****AVOID EXCESSIVE IR**
 - d. ER to tolerance at 45 degrees of Abd.
2. **PROM ONLY IF 90 DEGREES of ELEVATION IS NOT MET ACTIVELY**
3. Scapulothoracic joint mobilizations
4. Closed Chain exercises-table wash
5. Continue isometrics-Flex, ER, IR, and Abd.
6. Rhythmic stabilizations ER and IR at 0 degrees Abd

Stage 3 (6-10 weeks)

1. **AROM, AAROM if needed:** flexion to 160, abduction to 150, IR to stomach, and ER to tolerance
2. **PROM ONLY IF 125 DEGREES of ELEVATION IS NOT MET ACTIVELY**
3. **Strengthening:** Initiate tubing punch, ER and abduction. Progress light resistance to PRE's, gradually increasing weight as tolerated (can progress ER to 45-50 degrees), IR to stomach, and abduction; 8 weeks prone clocks
4. Initiate bicep and tricep PRE's
5. **Stabilization program:** t-band wall walk and wall push ups at 8 weeks
6. Cryotherapy and modalities as needed

Goals:

*Full ROM by week 8a
 Improve strength
 Neuromuscular control*

Stage 3 (10-16 weeks)

Criteria for Phase 3:

*Full pain-free ROM
 No pain*

Strength 80% to contralateral side

1. AROM and AAROM as needed
2. Capsular stretching as needed to get end ranges (12 weeks)
3. **Strengthening:** Continue to increase weight as tolerated, progress overhead PRE's, progress to 90/90 unsupported strengthening if needed, and etc.
4. **PNF initiated**
5. **Plyometric training initiated**
6. **Stabilization: 4pt to 3pt**
7. Return to throwing program (toss to interval progression) by 4-5 months post-op

Stage 4 (16-24 weeks)

Criteria for DC:

1. ROM WNL as per functional demand
2. Strength WNL as per functional demand

