



Latarajet Procedure Rehab Protocol

Phase I: Post-Surgical Phase (Weeks 0 thru 3)

Goals:

- Protect repair & Coracoid transfer
- Gradual restoration of passive ROM
 - Goal of 100° of Passive FE & 30° Passive ER @ 20° Abduction
- Ensure/enhance adequate scapular function

Precautions

- No Active Range of Motion (AROM) of operative shoulder
- Protect subscap & coracoid transfer. No aggressive ER or extension for 6 weeks.
- Remain in Ultra-Sling x 6 weeks. Sleep with sling (towel under elbow to prevent shoulder extension). Ok to remove when showering & during PT.

Activity

- PROM/AAROM/AROM elbow, wrist & hand. Grip strengthening.
- Begin Shoulder PROM
 - Passive Supine Forward Elevation to tolerance
 - Abduction in plane of scapula to tolerance
 - IR to 45° at 30° abduction
 - ER in plane of scapula from 0°-25° at 30° Abduction
- Scapular clocks, scapular isometrics, ball squeezes
- Ice several times each day for pain & inflammation control

Phase II: Intermediate Phase (Weeks 4 thru 9)

Goals:

- Protect repair & coracoid transfer
- Gradual restoration of AROM

- Goal of 100° of Passive FE and 30° Passive ER at 20° Abduction
- Wean from sling by end of Week 4-5

Precautions

- • No AROM until adequate PROM achieved (with good mechanics)
- • No lifting, excessive ER ROM or stretching
- • No activities which put excessive load on anterior shoulder (i.e push-ups, flys)

Activity: Early Phase II (Week 4)

- Progress Shoulder PROM
 - Passive Supine Forward Elevation to tolerance
 - Abduction in plane of scapula to tolerance
 - IR to 45° at 30° Abduction
 - ER in plane of scapula from 0° - 45° at 30-40° Abduction
 - Scapular clocks, scapular isometrics, ball squeezes
- Begin Posterior Capsular stretching including:
 - Cross-body adduction
 - Side-lying IR (sleeper stretch)
- No activities which put excessive load on anterior shoulder (i.e no push-ups, flys)

Activity: Late Phase II (Around Week 6)

- Progress Shoulder PROM
 - Forward Elevation and Abduction in plane of scapula to tolerance
 - IR as tolerated at multiple angles of Abduction
 - ER: Progress to multiple Abduction angles once ER >35° at 0° - 40° Abduction
- Glenohumeral (GH) and Scapulothoracic (ST) joint mobilization as needed
- Progress to AAROM & AROM activities with shoulder as tolerated
 - Sound mechanics = Minimal to no ST substitution in 90°-110° of Elevation
- Start Rhythmic Stabilization drills
 - ER/IR in scapular plane
 - Flexion/Extension and Abduction/Adduction at various angles of elevation
- Balanced AROM/Strengthening Program: Peri-Scapular & Rotator Cuff Musculature
 - Initiate full-can scapular raises to 90°
 - Initiate ER/IR strengthening with T-bands (with arm @ side)
 - Initiate light manual resistance ER supine in scapular plane
 - Initiate prone rowing at 30°/45°/90° of Abduction to neutral position
 - Focus on endurance with high reps (30-40) & low resistance
 - Achieve full Elevation in scapular plane prior to achieving Elevation in other planes
 - NO heavy lifting/plyometrics at this stage

Phase III – Strengthening Phase (Weeks 10 thru 15)

Goals

- Normalize strength, endurance and NM control
Gradual build-up of stress to anterior capsule
- Return to chest level full functional activity

Precautions

- Continue to avoid activities that place excessive load on anterior shoulder
- No above-the-shoulder strengthening until 4 months post-op.

Activity

- At 10 Weeks: Begin light resistive biceps strengthening
- At 12 Weeks:
 - Initiate gradual pec major/minor strengthening (avoid extreme Abduction/ER)
 - Progressive Subscap strengthening including:
 - Push-up plus (Wall, then Counter, then Knees on Floor, then Floor)
 - Cross-body diagonals with resistive tubing
 - IR resistive bands at 0°, 45° and 90° of Abduction
- At 16 Weeks: Begin active strengthening Above the shoulder

Phase IV – Overhead & Return to Activity Phase (weeks 16 – 30)

Goals

- Continue stretching and PROM as needed
- Maintain full, painless AROM
- Return to full strenuous work & recreational activity

Precautions

- Weight-lifting: Avoid tricep dips, wide-grip bench, military press & lat pull downs behind head
- Begin throwing or overhead athletics only after 4 months post-op.

Activity

- Continue all exercises listed above
- Ok to begin & progress isotonic strengthening
- Strengthen overhead once ROM & strength below 90° is adequate
- Stretch and strengthen shoulder 4 times per week

- Progressive return to UE weight-lifting program: Emphasis on large, primary upper extremity muscles including deltoid, lats and pec major
 - Start with light weight/high reps (15-25)
- Continue Push-ups (no elbow flexion past 90°)
- Initiate Plyometric/Interval sports program once cleared by PT and MD