



# Shoulder Arthroscopy Rehabilitation Protocol

## Precautions

- No heavy object lifting overhead
- No jerking movements
- Do not use affected shoulder in sitting or rising (most important for the first six weeks to avoid fracture/cracking to the acromion bone)

## Phase I: Immediate Motion (Weeks 0-2)

### Goals

- Re-establish non-painful ROM
- Prevent muscular atrophy
- Re-establish dynamic stabilization
- Decrease pain/inflammation

### Week 1

- Range of Motion:
  - Pendulums
  - Rope and pulley (non-painful arc of motion)
  - L-bar exercises (Elevation in scapular plane and ER/IR beginning at 30 degrees abduction and progressing to 45 degrees abduction)
- Strengthening exercises:
  - Isometrics-flexion, extension abduction, ER, IR, biceps
  - Rhythmic stabilization exercises (ER/IR and flex/ext)
- Decrease pain/inflammation:
  - Ice, NSAIDS, modalities

### Week 2

- Continue all ROM exercises
- May initiate heat prior to exercise
- Initiate ER/IR with L-bar at 90 degrees abduction
- Progress elevation to full ROM

- Progress isometrics
- Initiate ER/IR tubing at 0 degrees abduction

## Phase II: Immediate Phase (Weeks 2-6)

### Goals

- Regain and improve muscular strength
- Normalize arthrokinematics
- Improve neuromuscular control of the shoulder complex
- Diminish pain

### Criteria to progress to Phase II:

- Full ROM
- Minimal pain and tenderness
- Good MMT or IR, ER, flexion

### Week 2-3:

- Exercises
  - Initiate isotonic program (no weight)
  - Shoulder elevation
  - Prone rowing
  - Prone horizontal abduction
  - Sidelying ER
  - Shoulder abduction to 90 degrees
  - Shoulder extension to neutral
- After one week, provided patient has no pain and proper form, initiate exercise with 1 pound weight
- Normalize arthrokinematics of shoulder complex
  - Continue L-bar ROM
  - Elevation in scapular plane
  - ER/IR at 90 degrees abduction
- Joint mobilization: Inferior, posterior, and anterior glides
- Decrease pain and inflammation:
  - Continue use of modalities, ice as needed
  - May use heat prior to exercise program

### Week 4-5

- Progress to fundamental shoulder exercise program

## Phase III: Dynamic Strengthening (Week 6-12)

### Goals

- Improve strength/power/endurance
- Improve neuromuscular control
- Prepare athlete to return to sport

### Criteria to progress to Phase III:

- Full non-painful ROM
- No pain or tenderness
- Strength 70% compared to contralateral side

### Weeks 6-8

- Exercises
  - Continue isotonic program — fundamental shoulder
  - Progress strengthening exercises
  - Continue neuromuscular control exercises for scapular muscles
  - Continue endurance exercises
  - Initiate plyometric activities (2 hand drills)
    - If patient's goal is sport activities-chest pass and side to side throws

### Weeks 9-12

- Continue all exercises
- Initiate on hand plyometric drills (wall dribbles, baseball throws, shovel throws)
- Initiate sport program (week 10-12) if patient achieves specific criteria

## Phase IV: Return to Activity Phase (Weeks 13-22)

### Goals:

- Progressively increase activities to prepare for full functional return

### Criteria to progress to Phase IV

- Full ROM
- No pain or tenderness
- Satisfactory muscular strength
- Satisfactory clinical exam

### Exercises

- Continue ROM and strengthening program
- Continue self-capsular stretches as needed
- Continue fundamental shoulder exercise program

- Continue or initiate interval sports program
- Gradually return to overhead activities (i.e., sports)