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DR SHANNON SIM
ORTHOPAEDIC SURGEON

Arthroscopic Anterior Shoulder Stabilization Rehab Protocol

Stage 1 | **Stage 2** | **Stage 3** | **Stage 4** | **Stage 5**

PASSIVE RANGE OF MOTION (PROM)

(Movement to the joint by a physio, with no effort from the patient)

0 – 6 WEEKS

Goals

- Decrease pain and swelling
- Ensure wound is healing
- Protect the surgical repair
- Prevent stiffness

Precautions

- In the first 6 weeks you MUST remain in a sling (including sleeping). It is often more comfortable to sleep in a recliner or on several pillows
- In the first 6 weeks avoid lifting and carrying

Exercise Suggestions

- Your first physio appointment should be within 3 days after your surgery.

Muscle Activation

General

- Posture awareness/exercises
- Ball/thera-putty squeezes

Elbow & Wrist

- Active and passive – flexion (flex wrist down)
- Extension (flex wrist up), pronation (rotate the hand so the palm faces down)
- Supination (rotate the hand so the palm faces up) – (avoid elbow flexion if biceps repair or tenodesis)

Neck

- General range of motion (ROM) if needed

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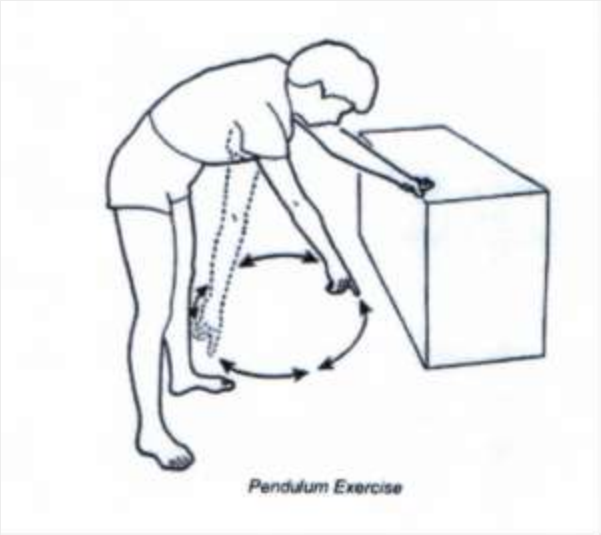
Shoulder

- Passive motion in supine position (lying on your back) through a combination range
- 0-2weeks: Pendulum exercises (see below)
- 2-4weeks: The rapist guided supine range of motion in therapy sessions
- 4-6weeks: Patient passive ROM

DO NOT PROGRESS TO STAGE 2 UNTIL ALL GOALS ARE MET



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ACTIVE ASSISTED (AAROM) -> ACTIVE RANGE OF MOTION (AOM)

(Movement to the joint with partial assistance by a physio à movement to the joint provided entirely by the patient)

6 – 12 WEEKS

Goals

Ensure adequate mobility

- Active-assisted ROM with progression to active ROM exercises to progressively restore motion
- Considerably decrease resting pain
- Initiation of functional activities of daily living

Precautions

- The sling is no longer necessary
- You may now use your arm. Avoid having the arm forcefully pulled behind you
- Continue to avoid heavy lifting or manual labour
- Do not lift objects over head with the weight of the object going behind the head. In other words, keep objects in front of you where you can see them.

Exercise Suggestions

- StartdrivingwhenyoucanturnthesteeringwheelWITHOUTanypainintheshoulder

PROM and AAROM

- Must be supervised/instructed by physio
- Use cane/stick(PROM) progressions: supine – 45o, semi-reclined – sitting/standing – pulleys (=AAROM)
- e.g. cane/stick exercises, pulleys

AROM

- Be guided by physio e.g. wall slides

Scapula

- Continue with protraction, retraction, elevation, depression
- Therapist guided advanced exercises for scapula

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Cardiovascular

- Stationary bicycle
- Treadmill
- Stairmaster

DO NOT PROGRESS TO STRENGTHENING UNTIL FULL, PAIN FREE ACTIVE RANGE OF MOTION ACHIEVED

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STRENGTHENING

3 – 4½ MONTHS

Goals

- Non-Painful normal range of motion.
- Progression of functional activities/heavier activities of daily living below shoulder height
- Address specific deficits of the affected upper extremity

Precautions

- Avoid overhead loads with affected arm (especially in the 'throwing' position)
- Avoid activities that cause pain

Exercises Suggestions

AROM

- MUST continue with AROM exercises to MAINTAIN movement

Muscle Strength and Endurance

- Progression is endurance THEN strength. Exercises should have

HIGH REPETITIONS (3 sets x 30 reps) before adding resistance.
Closely monitor shoulder/postural mechanics and pain throughout all exercises.
Rotator Cuff:

- Be guided by physio e.g. resistance bands/tubes

Scapula

- Be guided by physio – e.g. Swiss ball stabilization exercises

Cardiovascular

- Continue with stationary bicycle
- Treadmill
- Stairmaster
- Elliptical trainer(no arms)
- Walking

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Arthroscopic Anterior Shoulder Stabilization Rehab Protocol

ADVANCED STRENGTHENING & PREPARATION TO RETURN TO SPORT

4½ MONTHS+

Goals

- Full pain free AROM
- Continue to improve muscular strength, stability and endurance with emphasis on external rotation strength
- Functional activities of daily living above shoulder height
- Advanced strengthening program

Precautions

- It is unacceptable to experience pain with activities/exercise. This indicates the load/stresses placed on the arm are too much.
- In the first 6 weeks avoid lifting and carrying

Exercise Suggestions

- Muscle Strength and Endurance
- It is important to start with a weight that you can do 30 reps x 3 sets, the GRADUALLY increase the weight with the final aim of 12 reps x 3sets.

General

- Biceps/Triceps
- Chest press
- Shoulder press(military press)
- Reverse flys

Rotator Cuff

- Be guided by physio

Scapula

- Be guided by physio

Cardiovascular

- Train specific to demand of sport (aerobic, anaerobic)

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> 6 MONTHS

- Return to competitive sport once all goals achieved

AND

- Physio and Surgeon have declared you fit to do so

Consider Maintenance Exercise Program:

www.orthoinfo.org/PDFs/Rehab.Shoulde_5.pdf

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