

DMC Sports Medicine



Rehabilitation Protocol

PATIENT INFORMATION

BEFORE YOUR SURGERY:

You will meet with an orthopedic assistant a week before you scheduled surgery to go over the fundamentals of the rehabilitation program, preoperative and postoperative instructions, limitations after surgery, as well as to answer any questions regarding the upcoming surgical procedure. This meeting will allow you to discuss the exercise program and rehabilitation goals required for you to regain normal use of your shoulder following surgery. It is imperative that you understand the rehabilitation guidelines and goals in order to assure a safe and effective recovery from your surgery.

In general, most patients will perform exercises at home without a physical therapist's supervision for the first 1-2 weeks following surgery. You must have a clear understanding of the exercises to be performed to maximize your recovery. Please be sure to address any questions you have with the orthopedic physician assistant or your physician in an effort to minimize confusion.

Most patients will be discharged home after surgery. You will be expected to start the exercises on the first day after surgery, and continue them three times a day until you see your physician for follow-up in 7-10 days. Refer to pictures at the end of this protocol.

AFTER YOUR SURGERY:

Immediately after surgery you may not feel pain; this is because your shoulder may have been injected with a local anesthetic. Several hours after surgery the anesthetic will wear off and you will begin to feel pain unless a nerve catheter is in place. A prescription for pain medication has been provided and should be filled. You may use ibuprofen, aspirin, or tylenol in place of this but most patients require a stronger medication during the first 24-48 hours. Apply an ice bag to your shoulder to minimize the swelling. Do this 3 times daily for 20 minutes at a time. Your shoulder will be placed in a postoperative sling while in the operating room. You should place a dry towel in your arm pit and change daily to protect area and keep dry. You will have 3-4 small incisions. One on the back of your shoulder, side of your shoulder, and front of your shoulder. The incisions are closed with a black suture. These will be removed at your first post-operative visit.

Forty-eight hours after your procedure you may remove the dressings. You may shower, pat the area dry and place band aids over the sites. Allow arm to hang by your side for showers.

One day after surgery you will start elbow, wrist, finger, and neck ROM. You may also do pendulums in your sling. You will not do any active ROM of your shoulder beyond hand to mouth.

FIRST TWO WEEKS FOLLOWING DISCHARGE FROM THE HOSPITAL:

You need to continue to wear your sling at all times following your surgery. You can remove to do elbow, wrist, and finger ROM exercises. Do pendulum exercises. You may remove the strap around your body to do pendulum exercises. Continue to wear compressive dressing (TED stocking) on your leg until you are able to be up and walking consistently. These will help prevent blood clots from forming in your lower extremity if you are not moving around for prolonged periods of time.

Keep the incisions dry for the first 2 days following your surgery. After that, you may shower and gently wash the wounds with soap and water. Cover the wounds with band aids or pads for the first 7-10 days following the surgery or as long as there is drainage from the wounds. If you notice signs of infection, such as redness or pus drainage, please call the office. Do NOT take a bath, swim, or use a hot tub until you talk to your surgeon.

	0-2 weeks	3-4 weeks
Sling	Wear at all times with the bump; use shower sling when showering	D/C Sling at end of 4 weeks

REHABILITATION GUIDELINES

Phase I Post Op Phase weeks 0-5

Goals

- Decrease pain and swelling
- Monitor incision sites
- Check neurological function
- Begin AROM of shoulder
- Attain full AROM of elbow and wrist
- Initiate LB stabilization workout routine
- Protect integrity of structures repaired

Week 1 & 2

- Check for signs of infections
- Remove dressings and apply band aids (3-5 days post-op)
- Remove Sutures (~7-14 days post op)
- **Wear Sling at all times!!**
- Range of Motion:
 - Start Wrist AROM and Elbow AROM (out of brace but protecting shoulder)
- Check Neurological signs
- Exercises:
 - Start grip strengthening exercises
 - Can start Light Bike exercises while in sling

Week 3 & 4

- Range of Motion:
 - Continue all ROM exercises above
 - Initiate PROM Pulley exercises in forward flexion
 - AAROM exercises with a bar (forward flexion)
 - Supine Pendulum exercises
- Exercises:
 - Continue exercises above
 - Russian stim on Infraspinatus/Teres minor for strength
 - Start of Lower Body workout routine **Week 4**
 - Continue with Wrist/Elbow AROM exercises
- **Discontinue Brace at the end of 4th week**

Phase II Initial Strength Phase Weeks 5-12

Goals

- Strengthen shoulder muscles to restore true scapular thoracic motion
- Gain full true AROM of the shoulder
- Continue LB strengthening

Week 5

- Range of Motion:
 - Continue with ROM exercises above
 - Initiate AROM in Forward Flexion and AB/Adduction with back to the wall
- Exercises:
 - Initiate modified Six Packs four times a week
 - Initiate Physioball Circles, Up and Down, and left and right 3x30
 - Start Conditioning outside

Week 6

- Exercises:
 - Initiate UB/Rehab Workout Sheet (assuming full AROM)
 - Six Packs
 - Lat pull down Retraction
 - Smith Rack Protraction
 - Single Arm Kneeling diagonal Retraction
 - Cable Press Downs
 - Fantastic Fives (no manuals) as ROM tolerates
 - Initiate Elite Eight Elbow exercises
 - Prone Protraction

Week 8-12

- Increase lower body workout per sheet
- **Week 8**
 - Exercises:
 - Initiate full ROM exercises retracting before full motion
 - Smith Rack Bench Press
 - Seated Rows
 - Lat pull down
 - Pushups with protraction
 - Triceps extensions
 - Biceps Hammer Curls
 - BOSU Prone Protraction
 - Continue with all other exercises
 - Add Manual Protraction Exercises
- **Week 10**
 - Exercises:
 - Add Manual Retraction exercises

Phase III Intermediate Strength Phase Weeks 12-16

Goals:

- Continue UB strength
- Dynamic Shoulder Stability
- Continue strengthening to ensure true scapular thoracic movement

Week 12-16

- **Week 12**
 - Exercises
 - Start Full Lower Body Workout
 - Progress upper body exercises
 - DB Bench press
 - DB Bent over Rows
 - BOSU Pushups with protraction
 - Initiate Shrugs
 - Start Light Core Exercises involving Weighted Ball
 - Manual Resisted ER
 - ER/Abduction/Ecc. D2 DB exercises
 - Manual Seated horizontal rows with retraction
 - Manual supine rows with retraction
- **Week 14**
 - Exercises
 - Start Eccentric Tubing ER on UB/Rehab Ex. days
 - Can begin full core workout routine
- **Week 14** Initiate Plyometric trampoline exercises
 - **Week 14** Chest Passes
 - **Week 15** Side Throws close to body
 - **Week 16** Soccer Throws
 - **Week 17** Side Throws elbow away from body
 - **Week 18** Single hand throws from cocked position

Phase IV Pre-participation preparation weeks 16-34

Goals

- Develop Dynamic Stabilization of shoulder musculature
- Return to game throwing progression
- Continue strengthening of shoulder complex

Week 16-22

- **Week 16**
 - Move UB exercises to single arm exercises
 - Start RTC Dynamic Strength program on Mondays and Fridays, and Scap Strength Program on Tuesdays and Thursdays.
 - Core only on Wednesdays, No UB/LB lifting
- **Week 20**
 - Initiate ball throws against the wall
 - Throwing 20-30 throws to a wall 30-45' away three times a week

Week 22+

- Start Interval throwing progression (need 100% shoulder strength bilaterally, pain free full AROM of shoulder)
- Resume full upper body weight lifting.
- Discontinue RTC Dynamic Strengthening program and Scap Stab program for 1st and last week at new distance