

# **Shoulder & Elbow Surgery**

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# REHABILITATION PROTOCOL

(INFORMATION FOR PHYSIOTHERAPISTS)

# SHOULDER INSTABILITY REPAIR

#### 1. General Guidelines

- This is a GENERAL rehabilitation protocol. Any SPECIFIC instructions that differ from this protocol should be followed (see below). For revision surgery or larger repairs, this protocol will often be delayed.
- Supervised physiotherapy begins 1-2 weeks post-op and continues for 3-6 months, as necessary, depending on patient's progress, activity level and goals.
- In addition to formal physiotherapy, patients should be encouraged to exercise independently 3-5 times/day during Phases I and II and 3-5 times per week during Phases III and IV.

## 2. General Precautions

- The sling should be worn at all times for at least 4 weeks, except during physiotherapy treatment.
- No forward elevation beyond 90° or external rotation beyond 0° for 2 weeks.
- No passive ROM anytime.
- No external rotation in 90° abduction (throwing position) for 12 weeks.
- No pushing, pulling, or heavy lifting for at least 6 weeks.
- Surgery Specific Precautions:

   Open Repair: Avoid resisted Internal Rotation for 12 weeks (involves subscapularis repair).
   Biceps Tenodesis or Tenotomy: Avoid resisted Elbow Flexion for 6 weeks.
   Revision Surgery: Delay entire protocol 4 weeks (i.e. NO shoulder PT until 4 weeks post-op).

   3. Specific Instructions

Specific Instructions

# Phase I: Immediate Post-Op $\rightarrow$ 2 Weeks Post-Op

# 1. Objectives

- Protect the shoulder repair.
- Decrease post-op pain and swelling (can utilize ice/cooling device for 8-12 hours/day x 2 weeks).
- Begin general activities of daily living (ADL's) (i.e. feeding, bathing, and dressing).

## 2. Sling

- Worn at all times, except when under the supervision of the physiotherapist and when bathing.
- Should be worn for sleeping.

# 3. Therapeutic Exercises

- Ice after exercise program x 15 min.
- Pendulum shoulder ROM exercises
- No passive ROM
- Begin active-assisted ROM exercises (i.e. supine, pulleys, wall crawls, and cane exercises) limits of forward elevation of 90° and external rotation of 0°.
- General fitness may use stationary bike.
- Wrist/elbow ROM.

# Phase II: 2 Weeks Post Op $\rightarrow$ 6 Weeks Post-Op

## 1. Objectives

- Protect the shoulder repair.
- Achieve active ROM within limits.
- Begin cross-training to maintain general fitness.
- Return to work: modified duties (avoid heavy lifting and overhead activity).

#### 2. Sling

- May discontinue when sitting with arm at the side.
- Otherwise, should be worn at all times, except when under the supervision of the physiotherapist and when bathing.
- Should be worn for sleeping.

#### 3. Therapeutic Exercises

- Begin active and progressive active-assisted ROM exercises (i.e. pulleys, wall crawls, and cane exercises) (NO passive ROM) – limits of forward elevation of 140° and external rotation of 40°.
- Begin GENTLE isometric strengthening exercises (throughout range).
- Begin manual glenohumeral and scapular mobilization.
- May begin aquatic shoulder therapy.
- General fitness may use stationary bike.
- Begin peri-scapular muscle strengthening: postural work, scapular retraction, protraction, elevation and depression.
- Continue wrist/elbow ROM (as necessary).

# PHASE III: 6 Weeks Post Op → 12 Weeks Post-Op

# 1. Objectives

- Achieve full ROM in forward elevation, abduction, internal rotation and adduction.
- Achieve 80-90% ROM in external rotation (elbow at side).
- Increase shoulder strength.
- Return to work: for manual and overhead occupations.

# 2. Sling

May discontinue.

### 3. Therapeutic Exercises

- Continue active and active-assisted (i.e. pulleys, wall crawls, and cane exercises) ROM exercises forward elevation, abduction, external rotation, internal rotation (behind back) and internal rotation in
  abduction (NO passive ROM) no restrictions.
- No external rotation in 90° abduction (throwing position).
- Begin Theraband strengthening exercises for RTC, progressing to strengthening exercises with free weights for all planes (except IR). Increase repetitions before increasing weight (↑ endurance > ↑ strength).
  - If open repair Avoid resisted Internal Rotation for 12 weeks.
- Begin overhead activity.
- Begin swimming to increase shoulder strength at low resistance.
- Begin putting and chipping for golf.
- General fitness may begin running.

# Phase IV: 12 Weeks Post-Op $\rightarrow$ 6 months Post Op

#### 1. Objectives

- Maintain/improve shoulder ROM.
- Increase shoulder strength.
- Progressive return to sport.

#### 2. Sling

Already discontinued.

#### 3. Therapeutic Exercises

- Begin activities involving external rotation in 90° abduction (throwing position).
- Begin internal rotation strengthening.
- Begin sport-specific strengthening exercises.
- Begin low speed throwing / controlled racket sports / non-contact hockey at 3 months.
- Progress to competitive throwing / racket sports / contact sports at 6 months.
- Progressive return to golf: begin with irons progressing to full swings with all clubs at 6 months.