

Rehabilitation Protocol: Arthroscopic Posterior Shoulder Stabilization

Date of Surgery: _____

Protect the Posterior Capsule: Avoid posterior capsule stretch (IR, cross-body adduction, posterior glides) throughout. No passive stretching into IR. All strengthening below shoulder height until 12 weeks, using arcs that protect the posterior capsule.

Time points are guidelines – milestones of each phase should be achieved before advancing. Please contact our office with any questions or concerns.

☐ Phase I – Protection (Weeks 0–6)

- **Immobilizer (gunslinger/neutral rotation):** At all times for 4 weeks except for exercises and hygiene. **Weeks 4–6:** wean – wear only in crowded or uncontrolled environments (not needed at home or at night). Discontinue at 6 weeks
- **Precautions:** IR limited to neutral; no active IR; no stretching of the posterior capsule
- **Range of Motion –**
 - **Weeks 0–3:** No shoulder ROM other than pendulums/Codman's
 - **Weeks 3–6:** Begin PROM – flexion and abduction to 90° (pulleys/cane for flexion); ER as tolerated; IR to neutral
- **Therapeutic Exercises**
 - Elbow/wrist ROM and grip strengthening
 - Codman's/pendulums in sling
 - Anterior capsule (ER) stretching when warm
 - **Weeks 3–6:** Closed chain scapular exercises

☐ Phase II – Motion (Weeks 6–12)

- **Immobilizer:** None
- **Precautions:** No passive stretching into IR – protect the posterior capsule. All strengthening below shoulder height
- **Range of Motion –** AAROM/AROM for elevation, ER, and IR (good arm assists operative arm). Goals by 12 weeks: full ER, 135° flexion, 120° abduction
 - **Weeks 6–8:** IR to 10° with arm at side
 - **Weeks 8–10:** IR to 45° with arm at side
 - **Weeks 10–12:** IR to 45° with arm in 45° abduction
- **Therapeutic Exercises**
 - Deltoid and rotator cuff isometrics at 6 weeks, progressing to isotonic
 - **Weeks 8–10:** Slow introduction of Theraband IR
 - Resistive exercises for scapular stabilizers, biceps, and triceps
 - Wrist/forearm strengthening
 - Continue anterior capsule (ER) stretching when warm

☐ Phase III – Strengthening (Weeks 12–16)

- **Range of Motion –** AROM to restore full ROM; restore scapulohumeral rhythm
- **Therapeutic Exercises**
 - Advance Phase II activities; emphasize ER and latissimus eccentrics and glenohumeral stabilization
 - Rotator cuff PREs progressing from modified neutral into abduction
 - Muscle endurance (UBE); begin rotator cuff isokinetics
 - Continue anterior capsule stretching

- Cycling/running as tolerated at 12 weeks

☐ **Phase IV – Limited Return to Sport (Months 4–5)**

- **Range of Motion** – Full and pain-free; maintain ROM and flexibility
- **Therapeutic Exercises**
 - Aggressive scapular stabilization and eccentric strengthening
 - Plyometric training for overhead athletes
 - **Week 16:** Begin sport-specific activity – gentle throwing, golf swing, forehand/backhand; begin throwing/racquet program
 - Continue endurance activities

☐ **Phase V – Full Return to Sport (Months 5–7)**

- **Therapeutic Exercises**
 - Advance throwing/racquet program
 - Continue endurance activities; maintain ROM and flexibility
- **Return to Sport:** Full return to activity as tolerated with physician clearance