



ADVANCED ORTHOPAEDIC SPECIALISTS



Dr. Chris Arnold
Dr. Terry Sites
Dr. Ramon Ylanan
Dr. Mark Powell

POSTERIOR STABILIZATION REHABILITATION PROTOCOL

	RANGE OF MOTION	IMMOBILIZER	THERAPEUTIC EXERCISE
PHASE I 0 - 6 weeks	<p>0-3 weeks: None 3-6 weeks: begin passive</p> <p>ROM - limit flexion to 90°, internal rotation to 45°, and abduction to 90°</p>	Immobilized at all times (except for exercise) in flexion, abduction, and 0° of rotation	<p>0-3 weeks: elbow/wrist ROM, grip strengthening 3-6 weeks: begin passive ROM activities - Codman's, anterior capsule mobilizations</p>
Phase II 6 - 12 weeks	<p>Begin active/active-assistive ROM - passive ROM to tolerance</p> <p>ROM Goals: full external rotation, 135° of flexion, 120° of abduction</p>	Sling worn for comfort only	<p>Continue with exercises in phase I, begin active-assistive exercises, deltoid/ rotator cuff isometrics - At 8 weeks: begin resistive exercises* for scapular stabilizers, biceps, triceps, and rotator cuff</p>
Phase III 12 - 16 weeks	Gradual return to full active ROM	None	Advance activities in phase II, emphasize external rotation and latissimus eccentrics and glenohumeral stabilization, begin muscle endurance activities (upper body ergometer)
Phase IV 4 - 6 months**	Full and pain-free	None	Aggressive scapular stabilization and eccentric strengthening, begin plyometric and throwing/racquet program, continue with endurance activities, maintain ROM/flexibility
Phase V 6 - 7 months	Full and pain-free	None	Progress phase IV activities, return to full activity

*Utilize exercise arcs that protect the posterior capsule from stress during resistive exercises, and keep all strengthening exercises below the horizontal plane in this phase

**Limited return to sports activities