

SHOULDER RECONSTRUCTION POSTERIOR CAPSULAR SHIFT

Physical Therapy Protocol

PHASE I: PROTECTION - WEEKS 0-6

Goals: decrease pain I inflammation, allow healing of sutured capsule, initiate early protected range of motion, retard muscular atrophy

WEEKS 0-3 - EXERCISES

- Gripping exercises with putty
- Active elbow flexion/extension and pronation/supination
- AROM cervical spine
- Postural corrections as indicated
- Passive ROM progressing to
- External rotation to 45° with arm at side
- Abduction to 90°
- Submaximal shoulder isometrics:
 - Flexion
 - Abduction
 - Extension
 - External rotation

Note: in general, all exercises begin with one set of 10 repetitions and should increase by one set of 10 repetitions daily as tolerated to 5 sets of 10 repetitions. Ice after exercises for 20 minutes per hour to control pain and swelling.

WEEKS 4-6 - RANGE OF MOTION EXERCISES*

Goals: gradual increase in ROM, normalize arthrokinematics, improve strength

- Progress to active assisted range of motion exercises
- Rope and pulley
- External rotation to _____ with shoulder in scapular plane
- Shoulder abduction to tolerance
- Shoulder flexion to tolerance

**All exercises should be performed to tolerance. Take to the point of pain and/or tolerance and hold (5 seconds).*

PHASE II: INTERMEDIATE PHASE – WEEKS 6-12

Goals: full, non-painful ROM at week 8 (except internal rotation), normalize arthrokinematics, improve neuromuscular control

GENTLE CAPSULAR SELF STRETCHES

- Gentle joint mobilizations to re-establish normal:
 - Arthrokinematics
 - Scapulothoracic joint
 - Glenohumeral joint - avoid posterior glides
 - Sternoclavicular joint
- Strengthening exercises:
 - Active abduction to 90°
 - Active external rotation neutral to 90°
 - Elbow/wrist PREprogram
- Conditioning program for:
 - Trunk
 - Lower extremities
 - Cardiovascular endurance
- Decrease pain and inflammation:
 - Ice, NSAID, modalities

WEEKS 6-8 - EXERCISES

RANGE OF MOTION

- Begin active exercises
- External rotation to tolerance
- Shoulder abduction to tolerance
- Shoulder flexion to tolerance
- Rope and pulley: flexion and abduction
- Continue joint mobilization

STRENGTHENING

- Tubing for IR/ER at 0° abduction
- Initiate isotonic dumbbell program
- Shoulder abduction
- Shoulder flexion
- Latissimus dorsi
- Rhomboids
- Biceps Curl
- Triceps kick-out over table
- Shoulder shrugs
- Push-ups into wall (serratus anterior)

NEUROMUSCULAR CONTROL

- Progressive serratus anterior push-up- anterior flexion
- Continue trunk/LE strengthening and conditioning exercises
- Continue- neuromuscular exercises
- Continue self-capsular stretches

WEEKS 16-20

- Continue all exercises as above
- Emphasis on gradual return to recreational activities

CRITERIA TO PROGRESS TO PHASE IV

- Full ROM
- No pain/tenderness
- Satisfactory isokinetic test

PHASE IV: RETURN TO ACTIVITY - WEEK 21-28

Goals: progressively increase activities to prepare patient for unrestricted functional return

EXERCISES

- Continue tubing/dumbbell exercises outlined in phase III
- Continue ROM exercises
- Initiate interval programs between weeks 24-26 (if patient is a recreational athlete)

ADDENDUM

This protocol provides general rehabilitation guidelines following posterior capsular shift procedures. It is subject to modification depending on the degree of the lesion, any concomitant injuries and the type and extent of the surgical intervention. For any further questions, please call our office at (561) 465-8884.