

Post-Operative Rehabilitation for Arthroscopic Posterior Stabilization

Phase I: Weeks 0-6 GOALS:

- Protect anatomic repair
- Prevent negative immobilization
- Diminish pain and inflammation
- Sling
 - 0-2 Weeks: Worn at all times, including sleep. May remove for showering and exercises.
 - 2-6 Weeks: Worn during the day. May remove at night, for showering and exercises
- ROM/Exercises
 - Week 0-3
 - NO Shoulder ROM
 - Elbow, wrist, hand ROM. May do grip strengthening
 - Weeks 3-6
 - Begin PROM
 - Limit Flexion to 90°, IR to 45°, Abduction 90°
 - Codman's, posterior capsule mobilization, closed chain scapular exercises
 - AVOID stretching of anterior capsule
 - Cryotherapy, modalities as indicated

Phase II: Weeks 6-12

- Sling- May discontinue use
- ROM
 - Begin AROM/AAROM
 - GOALS: Full ER, Flexion 135°, Abduction 120°
 - PROM to tolerance
- Exercises:
 - Continue Phase I exercises
 - o At 8 weeks: Add active assisted exercises, deltoid/ rotator cuff isometrics
 - Begin resistive exercises for scapular stabilizers, biceps, triceps and rotator cuff
 - Utilize exercise arcs that protect the anterior capsule from stress during

resistive exercises, and keep all strengthening exercises below the horizontal plane in phase II

Phase III: Weeks 12-16

- ROM
 - Gradual return to FULL AROM
- Exercises:
 - o Advance Phase II exercises, with focus on ER and latissimus eccentrics
 - May begin upper body ergometer, muscle endurance activities
 - Bike/running as tolerated at 12 weeks

Phase IV: 4-5 Months

- ROM:
 - o Full and Pain free
- Exercises:
 - Aggressive scapular stabilization and eccentric strengthening
 - Begin plyometric program
 - Throwing./racquet sport progressions
 - o Continue with overall strength and endurance exercise

Phase V: 5-7 months

- ROM
 - Full and pain free. Flexibility maintained.
- Exercises:
 - Progress Phase IV exercises
 - Return to full activity/sport when cleared by MD