



UNION GENERAL ORTHOPEDICS & SPORTS MEDICINE

AFFILIATE OF: UNION GENERAL HEALTH SYSTEM

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SHOULDER ARTHROSCOPY WITH OR WITHOUT DCE PHYSICAL THERAPY

Philosophy

This protocol is to be utilized as a guideline. There will always be individual differences amongst patients regarding progression and tolerance of specific activities. Progression through the protocol will depend on successful accomplishments of set milestones as assessed by the physician and the physical therapist/athletic trainer.

The physical therapist and patient must constantly be aware of changes in condition, including but not limited to signs and symptoms of joint irritation/pain, tendonitis, and effusion. The patient's home exercise program is of utmost importance and should be monitored and emphasized.

Rehabilitation should create the optimal environment for the natural process of healing to occur. Initially, there should be a strong emphasis on minimizing swelling and pain as well as motion restoration. If a patient's progress is significantly delayed, please contact the physician office to keep them informed.

If you have any questions regarding this protocol, please contact the UGH Orthopedics and Sports Medicine Department at (706) 439-6858.

CAUTION: Return to intense activities such as lifting and sports early post-operatively may increase the overall chance of setbacks like reinjury and symptoms of pain, swelling, or instability should be closely monitored and reported by the patient.



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Phase I (0-6 weeks)

Goals

1. Decrease pain
2. Full PROM all directions
3. Independent with home exercise program
4. Initiate scapular awareness exercises
5. Initiate AROM with patient aware of upper trapezius substitution pattern

Precautions:

1. **No heavy lifting for 6 weeks**
2. **Sling for comfort**
3. ***If distal clavicle excision is performed, no cross body adduction past neutral and no overhead lifting for 8 weeks.**

Exercises Phase I

1. PROM for flexion, scaption, and external rotation
2. Grade II, III glenohumeral mobilizations anterior, inferior, and posterior directions
3. Manual scapular resistance exercises
4. Codman's all directions
5. Active elbow flexion, and extension
6. Gripping exercises for the hand
7. Cervical AROM all directions
8. Educate family on performing PROM for home if appropriate
9. Modalities PRN Continue PROM, and initiate AAROM for flexion, abduction, ER, and IR
10. Scapular strengthening exercises (with bands)
11. Band resistive exercises for IR, and extension
12. Band resistive exercises for biceps and triceps
13. Continue to maintain cervical AROM all directions
14. Can perform lower extremity strengthening and cardiovascular exercises that are non-stressful to the shoulder
15. Trunk stabilization exercises
16. Initiate band resisted exercises for external rotation and abduction
17. Perform AROM for flexion, and scaption with emphasis on scapular awareness to minimize the upper trap influence
18. Initiate light resistance exercises in all scapular planes