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ARTHROSCOPIC/OPEN STABILIZATION REHABILITATION GUIDELINES

Phase I N	4AX	(IMAL PROTECTION (0-4 Weeks Post-Op)
		Immobilization for 4 weeks using sling.
		Elbow A/AAROM: flexion and extension.
		Protect anterior and posterior capsule from stretch
		Limit FE (supine forward elevation in the scapular plane) to 90 degrees
		Limit ER (external rotation) to neutral 20 degrees
		Do Not perform Pendulums.
		Modalities (i.e. CryoCuff) PRN(as needed).
		Wrist and gripping exercises.
		Begin Deltoid/Cuff isometrics
		Removal of sling for showering: maintain arm in sling position.
Phase II	мо	DERATE PROTECTION (4-6 Weeks Post-Op)
		A/AAROM Limit FE (forward elevation in the scapular plane) to 140 degrees
		A/AAROM Limit ER (external rotation) to 45 degrees
		Progress from AAROM to AROM:
		 Quality movement only-avoid forcing active motion with substitution
		patterns.
		 Remember the effects of gravity on the limb, do gravity eliminated motions first ie. Supine elevation in the scapular plane.
		Deltoid isometries.
	_	Elbow AROM
		Continue with wrist exercises
	_	Modalities PRN.
		Discontinue sling at 4-6 weeks.
Phase III	МІ	NIMAL PROTECTION / MILD STRENGTHENING (6-12 Weeks
Post-OP)		
		A/AAROM No Limit FE (forward elevation in the scapular plane)
		A/AAROM No Limit ER (external rotation)
		10-12 weeks, AIAA/PROM to improve ER with arm in 45 degree abduction.
		AROM all directions below horizontal, light resisted motions in all planes.
		AROM activities to restore flexion, IR, horiz ADD as tolerated.
		Deltoid, Rotator Cuff isometrics progressing to isotonics.
		PRE's for scapular muscles, latissimus, biceps, triceps.
		PRE's work rotators in isolation (use modified neutral).
		Emphasize posterior cuff, latissimus, and scapular muscle strengthening,
		stressing eccentrics.

	Keep all strength exercises below the horizontal plane in this phase.		
Dhass IV CT	DENCTHENING (12.16 Works Boot On)		
Phase IV STRENGTHENING (12-16 Weeks Post-Op)			
	CRITERIA:		
_	1) Pain-free AROM		
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	Pain-free with manual muscle test		
	Progress by response to treatment		
	AROM activities to restore full ROM.		
	Restore scapulohumeral rhythm.		
	Joint mobilization.		
	Aggressive scapular stabilization and eccentric strengthening program.		
	Initiate isotonic shoulder strengthening exercises including: side lying ER, prone		
	arm raises at 0, 90, 120 degrees, elevation in the plane of the scapula with IR and		
	ER, lat pulldown close grip, and prone ER.		
	Dynamic stabilization WB and NWB.		
	PRE's for all upper quarter musculature (begin to integrate upper extremity		
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	patterns). Continue to emphasize eccentrics and glenohumeral stabilization.		
	All PRE's are below the horizontal plane for non-throwers.		
	Begin isokinetics.		
	Begin muscle endurance activities (UBE).		
	High seat and low resistance Most be able to do notice about the Continue to CO do not so without.		
	 Must be able to do active shoulder flexion to 90 degrees without substitution 		
	Continue with agility exercises.		
	Advanced functional exercises.		
	Isokinetic test.		
	Functional test assessment.		

7) Full return to sporting activities.

☐ Utilize exercise arcs that protect anterior and posterior capsule from stress

during PRE's.