

P: 405.885.8195 F: 405.218.2535 E: <u>ortho@jtglomsetmd.com</u> www.jtglomsetmd.com

## POSTERIOR STABILIZATION REHABILITATION PROTOCOL

	RANGE OF MOTION	IMMOBILIZER	EXERCISES
PHASE I 0-6 weeks	0-3 weeks: None 3-6 weeks: Begin PROM Limit 90° flexion, 45° IR, 90° abduction	<ul> <li>0-2 weeks: Immobilized at all times day and night</li> <li>Off for hygiene and gentle exercise according to instruction sheets</li> <li>2-6 weeks: Worn</li> </ul>	<ul> <li>0-3 weeks: Elbow/wrist ROM, grip strengthening at home only</li> <li>3-6 weeks: Begin PROM activities</li> <li>Codman's, posterior capsule mobilizations; avoid stretch of anterior capsule; closed chain scapula</li> </ul>
PHASE II 6-12 weeks	Begin active/active assisted ROM, passive ROM to tolerance Goals: full ER, 135° flexion, 120° abduction	daytime only None	Continue Phase I work; begin active assisted exercises, deltoid/rotator cuff isometrics at 8 weeks Begin resistive exercises for scapular stabilizers, biceps, triceps and rotator cuff*
PHASE III 12-16 weeks	Gradual return to full AROM	None	Advance activities in Phase II; emphasize external rotation and latissimus eccentrics, glenohumeral stabilization Begin muscle endurance activities (upper body ergometer) Cycling/running as tolerated at 12 weeks
PHASE IV 4-5 months**	Full and pain-free	None	Aggressive scapular stabilization and eccentric strengthening Begin plyometric and throwing/racquet program, continue with endurance activities Maintain ROM and flexibility
PHASE V 5-7 months	Full and pain-free	None	Progress Phase IV activities, return to full activity as tolerated

\*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

\*\*Limited return to sports activities