Arthroscopic Posterior Capsular Shift/Plication and Labral Repair
Post-Operative Rehabilitation Protocol
There is no subscapularis involvement

<table>
<thead>
<tr>
<th>BICEPS TENODESIS PRECAUTIONS:</th>
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<tr>
<td>1.  No Resisted elbow flexion for 8 weeks</td>
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<td>2.  No Resisted shoulder flexion for 8 weeks</td>
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<td>3.  No Lifting of anything over 1 to 2 pounds for 8 weeks.</td>
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I. Phase I – Protection Phase (Week 0 – 6)

Goals: Protect surgical site
- Initiate ROM to prevent adhesions and increase circulation
- Initiate muscle contraction to enhance dynamic stability
- Decrease pain/inflammation

General considerations:
1. Wear sling for 4-6 weeks and sleep in immobilizer for 4 weeks
2. No overhead activities for 4 weeks
3. No active or passive extension for 4 weeks
4. No internal rotation PROM
5. Avoid passive flexion greater than 90 degrees for 4 weeks
6. Provide support during flexion to prevent gravity assisted posterior humeral head translation (perform PROM in S/L or prone)

A. Week 0 - 2
1. PROM / AAROM (No IR)
   a. Shoulder flexion in Prone or Side-lying to 90 degrees***
      *Be sure to support so humeral head does not stress posterior capsule
   b. ER (at 20º ABD) to 45º
2. Wrist, elbow, and cervical spine AROM
3. Grip and wrist strength
4. Submaximal isometrics at 0º ABD with towel roll Shoulder ER, IR, Ext., flex, and ABD (with humerus in neutral position)
5. Scapular retractions and depression (no extension)
6. Cryotherapy

B. Week 3 – 4
1. PROM and AAROM (No IR)
   a. Shoulder flexion in prone or side-lying to **90 degrees***
      *Be sure to support so humeral head does not stress posterior capsule

* Developed and approved by Rolando Izquierdo, M.D. (Updated March 2016)
PROM and AAROM
   b. ER to 60º in scapular plane
   c. Shoulder horizontal ABD/ADD (gentle)
2. AAROM (Cane and pulley exercises within ROM limits)
3. Scapular retractions and depression
4. Gentle joint mobilization (GH, SC, and scapulothoracic)
5. Multi-angle isometrics progressive resistance
6. Scapular PNF
7. AROM: IR/ER within patient limits (week 3)
8. Cryotherapy and modalities as needed

C. Week 5 – 6
1. PROM and AAROM
   a. Shoulder flexion to 130 starting at week 5 (160º by week 6)
   b. Shoulder extension to 30º by week 6
   c. ER to tolerance
   d. IR to 60º at week 5 / IR to tolerance at 6 weeks (Not before)
   e. ER at 90º ABD to tolerance (60º-80º)
2. AROM: Standing flexion and ABD to tolerance (no hiking)
3. Theraband IR/ER at 0º ABD
4. Supraspinatus progress full can within ROM limits
5. Closed kinetic chain exercises (prone on elbows, quadruped, etc.)
6. Upper body ergometer (UBE) light resistance
7. Posterior capsular stretching (gentle)
8. Grade II and III joint mobilizations - posterior and inferior
9. Progress stabilization and neuromuscular control exercises
10. Initiate light resistance isotonics
    a. Biceps / triceps
    b. Punches
    c. Prone Rowing and extension (to neutral)

II. Phase II – Intermediate Phase (Week 6 – 12)

Goals: Full non-painful ROM by week 8
Normalize arthrokinematics
Increase strength and neuromuscular control

A. Week 6 – 8
1. AAROM/PROM – progress to full ROM by week 8:
   a. ER at 90º ABD to 90 - 100º
   b. IR at 90º ABD to 70 – 75º
2. Continue joint mobilizations and capsular stretches
3. Isotonic dumbbell program
   Supine and Sidelying IR/ER, Shoulder ABD, Biceps/triceps, Serratus punches
4. Supine IR/ER theraband up to 90 degrees ABD
5. Rhythmic stabilization for IR/ER at 45º ABD
6. PNF D2 diagonals light manual resistance
7. UBE with higher resistance
8. Push-up (plus) progression (wall, counter, table, knees) (elbow to thorax)
9. Quadraped rhythmic stabilization
10. Prone ER with 90 degrees ABD and 90 degrees elbow flex
11. Bodyblade (start with arm down by side)

B. Week 9 -12

1. Full AROM
2. Continue all above exercises
3. Prone extension, lower trap, and horizontal ABD (thumb up and down)
4. Aggressive stretching and joint mobilization, if needed
5. Double hand plyometrics (chest, overhead, and diagonals) (10 wks)
6. Latissimus pulldowns in front of body
7. Progress to one hand plyometrics (ball toss, ball on wall) (close to 12 wks)
8. PNF – progress from manual resistance to theraband

III. Advanced Strengthening Phase (Week 12 – 20)

A. Week 12 – 16

1. Continue self capsular stretches
2. Theraband IR/ER in 90/90 position (fast)
3. Continue all isotonic strengthening
4. Progress to floor push-ups (plus) with BOSU
5. Progress neuromuscular control exercises
6. Throwing into plyoback (1#)

B. Week 16 -20

1. Continue all above exercises
2. Initiate interval sports program
3. Progress plyometrics
   a. ER and IR at 90º ABD
   b. D2 extension plyometrics
   c. Plyoball and Deceleration tosses
4. Bench press (do not allow arm below the body)