Greater Hartford Orthopedic Group, P.C.

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Postoperative Rehabilitation Protocol: Inferior Capsular Shift

Phase I: Weeks 0-4

GOALS: Protect anterior capsule and labrum, minimize pain and swelling, full PROM, encourage HEP

Immobilization: Wear sling at all times except for hygiene and home exercises

ROM: Progress to full passive flexion, abduction and internal rotation as tolerated External rotation limited to:

- 30 degrees at 45 degrees abduction week 2

- 45 degrees at 45 degrees abduction week 3

- 45-60 degrees at 60-90 degrees abduction week 4

Modalities: Cryotherapy

EMS to shoulder girdle muscles as indicated

Exercises: Elbow, wrist and hand active ROM

PROM FE and ER as discussed above and joint mobilizations

Submaximal shoulder isometrics in all planes

Progression to scapular and rotator cuff PRE's with arm at side as tolerated

No resisted shoulder elevations

Phase II: Weeks 4-12

GOALS: Protect anterior capsule and labrum, full PROM in all planes, maximize muscle strength of rotator cuff and scapular stabilizer muscles

Immobilization: -Discontinue shoulder sling as tolerated

ROM: Progress to full by 6 weeks, aggressively as needed External rotation to full at 90 abduction by week 8

Modalities: Cryotherapy

Exercises: Overhead pulleys, wands/canes, pendulum, passive ROM as indicated

PROM and joint mobilizations

Progress PRE program - prone scapular stabilization program, rotator cuff

strengthening/endurance

Total Arm Strengthening program for maximum functional strength

Aerobic conditioning as tolerated

Phase III: 3 – 6+ Months

GOALS: Maximize rotator cuff strength and scapular stabilizer muscles, return to pain free functional sport and/or work activities

ROM: Full pain free ROM throughout, aggressively pursuing any deficits

Exercises: Begin throwing program and/or overhead activities Closed chain/push up progression

Return to Sport/Function:_-Strength goals met

-Full ROM

Functional Progression and/or Work Hardening completed

Throwing Program at 6 month post op.