



Post-Op Rehab Protocol for Shoulder Debridement, Decompression, Distal Clavicle Excision

Phase 1 0- 3 weeks after surgery

Appointments

- PT begins 5-8 days post-op

Goals

- Reduce pain and swelling in the post-surgical shoulder
- Regain full passive range of motion (PROM) and active assistive range of motion (AAROM)
- Activation of the stabilizing muscles of the gleno-humeral and scapulo-thoracic joints

Precautions

- Avoid activities that may impinge on the denuded bone of the acromion
- Use sling as needed for comfort
- Relative rest to reduce inflammation

Suggested Exercises

- Begin 5-8 days after surgery, sub-maximal shoulder isometrics for internal rotation (IR)/external rotation (ER), flexion/ extension and abduction/adduction
- Shoulder AAROM/PROM: Codman's, pulleys, cane exercises in all planes of motion except horizontal adduction (these should stay relatively pain free)
- Gentle shoulder mobilizations, as needed
- Hand gripping
- Elbow, forearm and wrist active range of motion (AROM)
- Cervical spine and scapular AROM
- Postural exercises

Cardiovascular

- Walking, stationery bike
- Avoid running and jumping due to the forces that can occur upon landing

Progression Criteria

- The patient can progress to Phase 2 when they have achieved full PROM and normal (5/5) strength IR/ER with arm at side



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Phase 2 to begin after meeting phase 1 progression criteria, usually 4-5 weeks after surgery

Appointments

- Once every 1-2 weeks

Goals

- Controlled restoration of AROM
- Strengthen shoulder and scapular stabilizers in protected position (0-45° abduction)
- Begin proprioceptive and dynamic neuromuscular control retraining
- Correct postural dysfunctions

Precautions

- Avoid repetitive overhead activities
- Post-rehabilitation soreness should alleviate within 12 hours of the activities

Suggested Exercises

- AROM in all cardinal planes--assessing scapular rhythm
- Gentle shoulder mobilizations, as needed
- Rotator cuff strengthening in non-provocative positions (0° - 45° abduction)
- Scapular strengthening and dynamic neuromuscular control
- Cervical spine and scapular AROM
- Postural exercises
- Core strengthening

Cardiovascular

- Walking, stationery bike, Stairmaster
- Avoid running and jumping until athlete has full rotator cuff strength in a neutral position due to forces that can occur upon landing

Progression Criteria

- The patient can progress to Phase 3 when they have achieved full AROM (equal to uninvolved side) and normal (5/5) strength for internal rotation/external rotation with shoulder at 45° abduction



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Phase 3 to begin after meeting phase 2 progression criteria, usually 6-8 weeks after surgery

Appointments

- Once every 2-3 weeks

Goals

- Normal (5/5) rotator cuff strength at 90° abduction and with supraspinatus testing
- Full multi-planar AROM
- Advance proprioceptive and dynamic neuromuscular control retraining
- Correct postural dysfunctions with sport/work specific tasks

Precautions

- Post-rehabilitation soreness should alleviate within 12 hours of the activities

Suggested Exercises

- Multi-plane AROM with gradual increase in velocity of movement - assessing scapular rhythm
- Gentle shoulder mobilizations, as needed
- Rotator cuff strengthening at 90° abduction, provocative positions and sport/work specific positions
- Scapular strengthening and dynamic neuromuscular control in overhead positions and sport/work specific positions
- Cervical spine and scapular AROM
- Postural exercises
- Core strengthening
- Begin education in sport specific biomechanics with very initial program for throwing, swimming or overhead racquet sports

Cardiovascular

- Walking, stationery bike, Stairmaster, running
- Avoid swimming until athlete has normal (5/5) rotator cuff strength at 90° abduction and negative impingement signs

Progression Criteria

- The patient can progress to Phase 4 when they have achieved full multi-plane AROM (equal to uninvolved side) and normal (5/5) strength for internal rotation/ external rotation with the shoulder at 90° abduction and full supraspinatus strength



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Phase 4 to begin after meeting phase 3 criteria, usually 10-12 weeks after surgery

Appointments

- Once every 2-3 weeks

Goals

- Normal rotator cuff strength at 90° abduction and with supraspinatus testing
- Advance proprioceptive and dynamic neuromuscular control retraining
- Correct postural dysfunctions with sport/work specific tasks
- Develop strength and control for movements required for sport/work

Precautions

- Post-rehabilitation soreness should alleviate within 12 hours of the activities

Suggested Exercises

- Multi-plane AROM with gradual increase in velocity of movement - assessing scapular rhythm
- Shoulder mobilizations, as needed
- Rotator cuff strengthening at 90° abduction, provocative positions and sport/ work specific positions-including eccentric strengthening, endurance and velocity specific exercises
- Scapular strengthening and dynamic neuromuscular control in overhead positions and sport/work specific positions
- Sport/work specific positions
- Core and lower body strengthening
- Throwing program, swimming program or overhead racquet program, as needed

Cardiovascular

- Design to use sport/work specific energy systems

Progression Criteria

- The patient may return to sport after receiving clearance from the orthopedic surgeon and rehabilitation therapist. This will be based on meeting the goals of Phase 3