

<b>UCLA OUTPATIENT REHABILITATION SERVICES</b>	
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<b>Place label here</b>	
NAME OF PATIENT: _____	
MRN: _____	

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**SHOULDER ARTHROSCOPIC STABILIZATION PHYSICAL THERAPY PRESCRIPTION**

**Diagnosis: s/p ( LEFT / RIGHT ) Shoulder Arthroscopic Anterior Stabilization -- Surgery Date: \_\_\_\_\_**

**PHASE 1: Initial Recovery / Recuperation Phase: WEEKS 1-4**

- \_\_\_ Immobilization in sling x 3-4 weeks except for exercises; Elbow A/AAROM: flexion and extension
- \_\_\_ Protect anterior capsule from stretch. Limit ER to neutral, abduction or forward elevation to 90° and only in scapular plane. **No active ER**
- \_\_\_ Modalities (i.e. CryoCuff) PRN; Wrist and gripping exercises; Deltoid isometrics

**PHASE 2: Initial Rehab / Motion Phase: WEEKS 4-6**

- \_\_\_ At 4 weeks, begin supine PROM and pendulum exercises in plane of scapula with limit of 90° of forward elevation/abduction; supine PROM ER to 15° with broomstick; No active ER
- \_\_\_ Pool exercises: A/AAROM flexion, extension, horiz. add, elbow flex & extension; Modalities PRN
- \_\_\_ Deltoid isometrics; light wrist flexion/extension exercises with forearm neutral or in pronation
- \_\_\_ Begin to wean sling at home during week 5 and discontinue use of sling during week 6

**PHASE 3: Motion Restoration Phase: WEEKS 6-12**

- \_\_\_ 6-10 weeks, gradual A/AA/PROM to improve ER with arm at side
  - Goals = 30° ER at 8 wks; 50° ER at 10-12 wks; 75° ER at 12-14 wks
- \_\_\_ Progress forward elevation to tolerance by emphasizing passive supine forward elevation; progressive to active assist forward elevation in plane of scapula with shoulder/proximal humerus in neutral rotation
- \_\_\_ At 10-12 weeks, initiate A/AA/PROM to improve ER with arm in 45° abduction
  - Goal at 10 wks = ~45° ER in 45° Abduction
- \_\_\_ At 10-12 weeks, incorporate pulley use to gradually facilitate PROM forward elevation to full in neutral
- \_\_\_ Pool exercises AROM all directions below horizontal, light resisted motions in all planes
- \_\_\_ AROM activities to restore flexion, IR, horiz ADD
- \_\_\_ Deltoid isometrics progressing to isotonic
- \_\_\_ Joint mobilization (posterior glides)
- \_\_\_ Rotator Cuff – begin isometrics
- \_\_\_ PRE's work rotators in isolation (use modified neutral)
- \_\_\_ PRE's for scapular muscles, latissimus, biceps, triceps
- \_\_\_ Emphasize posterior cuff, latissimus, & scapular muscle strengthen, stress eccentrics
- \_\_\_ Utilize exercise arcs that protect anterior capsule from stress during PRE's
- \_\_\_ Keep all strength exercises below the horizontal plane in this phase

**PHASE 4: Progressive Motion & Initial Strengthening Phase: WEEKS 12-16**

- \_\_\_ AAROM activities to restore full ROM
- \_\_\_ Restore scapulohumeral rhythm
- \_\_\_ Aggressive scapular stabilization & eccentric strengthening
  - PRE's for all upper quarter musculature (begin to integrate upper extremity patterns). Continue to emphasize eccentrics and glenohumeral stabilization. All PRE's are below the horizontal plane for non-throwers
- \_\_\_ Joint mobilization
- \_\_\_ Begin isokinetics

**PHASE 5: Progressive Strengthening Phase: WEEKS 16-24**

- \_\_\_ Begin muscle endurance activities (UBE)
- \_\_\_ Continue with agility exercises
- \_\_\_ Advanced functional exercises
- \_\_\_ Full return to sporting activities with MD clearance

**Treatment:** \_\_\_\_\_ **times per week**    **Duration:** \_\_\_\_\_ **weeks**    \_\_\_ **Home Program**

\*\*Please send progress notes.

**Physician's Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_  
**Kristofer J. Jones, M.D., Attending Orthopaedic Surgeon**