Weeks 1-6, Begin Date:______________________________

Sling for 4 weeks
• PROM → AAROM → AROM as tolerated, except . . .
• No active IR/backwards extension for 6 weeks. No ER past 20-30°. The subscapularis tendon is taken down for the surgery and then repaired afterwards. It takes about 4-6 weeks for it to grow back into the humerus and regenerate a blood and nerve supply.
• PROM in biceps flexion for first 6 weeks
• ROM goals: Week 1: 120° FF/20° ER at side; ABD max 75° without rotation
• ROM goals: Week 2: 140° FF/40° ER at side; ABD max 75° without rotation
• No resisted internal rotation/backward extension until 12 weeks post-op
• Grip strengthening OK
• Canes/pulleys OK if advancing from PROM
• Heat before PT, ice after PT

Weeks 6-12, Begin Date:______________________________

• Begin AAROM → AROM for internal rotation and backwards extension as tolerated, if not already begun.
• Goals: Increase ROM as tolerated with gentle passive stretching at end ranges
• Begin light resisted ER/FF/ABD: isometrics and bands, concentric motions only
• No resisted internal rotation/backwards extension until 12 weeks post-op
• No scapular retractions with bands yet

Months 3-12, Begin Date:______________________________

• Begin resisted IR/BE (isometrics/bands): isometrics → light bands → weights
• Advance strengthening as tolerated; 10 reps/1 set per exercise for rotator cuff, deltoid, and scapular stabilizers.
• Increase ROM to full with passive stretching at end ranges
• Begin eccentric motions, plyometrics, and closed chain exercises at 12 weeks.

Return to Activities:
• Computer 4 weeks
• Golf 3 months
• Tennis 4 months

Comments:

_____ Functional Capacity Evaluation  _____ Work Hardening/Work Conditioning  _____ Teach HEP
Dr. Mark McKenna

___ Electric Stimulation   ___Ultrasound   ___ Iontophoresis   ___ Phonophoresis   ___ TENS   ___ Heat before/after

___ Ice before/after   ___ Trigger points massage   ___ Other __________________________________

___ Therapist’s discretion

Signature__________________________________________ Date__________________