

	PRECAUTIONS	ROM	EXERCISES
Phase 1: 0-2 weeks 2-3x/week	Pouch Sling with activity and at rest	Limited shoulder PROM	AROM of the neck, hand/grip, wrist, and elbow **avoid active elbow flexion x 4-6 weeks if biceps tenotomy. Perform active-assisted elbow motion instead**
Phase 2: 2-6 weeks 2-3x/week	Pouch sling when up	Shoulder PROM only It is passive motion, NOT STRETCHING ER to 60 FLexion to 140 IR avoiding pain	provide passive shoulder range of motion Wrist (supported) PRE's with light weight; Elbow AROM; Grip Supine wand External rotation PROM (if no subscapularis repair) Scapular Isometrics Codman's pendulum exercises 3 x/day
Phase 3: 6-8 weeks 2x/week	D/C Sling	Begin shoulder AAROM	Active-assisted range of motion: Pulleys, supine wand flexion; "wand-ranger" to 90°; wall crawls UBE - No resistance Begin submaximal shoulder isometrics for IR/ER/Ext. Elbow PRE's (arm at side) Scapular stabilization exercises
Phase 4: 8-12 weeks 1-2x/week		Begin Shoulder AROM Avoid Upper Trapezius hiking	standing wand flexion/abduction Sidelying AROM: ER and Abduction Short lever isotonics IR/ER (cable, theraband) Prone Scapular "I", "T", "Y" Do not push active motion through shoulder shrug sign
Phase 5: 12-24 weeks 1-2x/week	MD to determine weight restrictions	Full AROM	Long-lever strengthening, PNF patterns, body blade, wall push-ups, HEP Continue stretching
Phase 6: 6 Months+	No restrictions		Work-Specific training Sport-Specific activity, drills, throwing programs.

MD post op appts: 1 week, 2 weeks, 6 weeks, 12 weeks, 5 months.

Please send PT progress notes prior to each of these MD appts.

This protocol is not a substitute for clinical decision making of the health care professional.

Please see PT referral for any specific post op instructions.