

	PRECAUTIONS	ROM	EXERCISES
Phase 1: 0-2 weeks 2-3x/week	Pouch Sling with activity and at rest Remove Dressings 3 days post-op	Shoulder PROM only It is passive motion, NOT STRETCHING ER 30 Flexion 90 Abduction 90	AROM of the neck, hand/grip, wrist, and elbow; Gentle Shoulder PROM **avoid active elbow flexion x 4-6 weeks if biceps tenotomy. Perform active-assisted elbow motion instead** Codman's pendulum exercises 3 x/day
Phase 2: 2-6 weeks 2-3x/week	Pouch sling when up	Shoulder PROM only ER to 60 FLexion to 140 IR avoiding pain	Shoulder PROM Wrist (supported) PRE's with light weight; Elbow AROM; Grip Supine wand External rotation PROM (if no subscapularis repair) Scapular Isometrics
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: 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.