

DuPage Medical Group
Post-Operative Shoulder Instability Protocol

This protocol is a guide for patients who have undergone surgery to repair an unstable shoulder. Each patient is to be advanced individually through the protocol taking into consideration factors such as (but not limited to): the type of surgery (arthroscopic vs. open repair), amount of instability, direction of instability (i.e. /ant, post, inf, multidirectional), quality of tissue, age, secondary injuries, and any change in symptoms. Physician orders on a script will always override this protocol guidelines- contact physician immediately if any questions or concerns arise.

Immediately post-op:

- Placed in a shoulder immobilizer
- Pain meds for comfort
- 1st post-op visit in MD office 1 week after surgery
- No lifting/carrying objects on affected side while in brace
- No PROM for 6 weeks post-operatively (goal of surgery is to create more stability in shoulder by tightening up structures)

6 weeks post-operatively:

- D/C immobilizer
- Being PROM all planes of motion for shoulder (avoid overstretching at end range in direction of instability- especially avoiding maximal ER and ABD)
- Initiate AA/AROM exercises as appropriate
- Active hand/wrist/elbow exercises
- Modalities as indicated/appropriate
- No resistive training yet!

10-12 weeks post-operatively:

- Continue with above P/AA/AROM exercises as appropriate
- Initiate light resistive training for RC, deltoid, scapular stabilizers, biceps, and distal UE musculature as tolerated
- Begin eccentrically resisted motions, plyometrics, and proprioceptive training when indicated by improving strength
- Only do strengthening 3x/wk to avoid rotator cuff tendonitis
- Modalities as indicated/appropriate

4-6 months post-operatively:

- Begin sports related rehab, including advanced conditioning
- Return to throwing 6mos
- Throw from pitcher's mound 9mos

6-12 months post-operatively:

- Return to sports/leisure activities without restrictions (collision type sports may be indicated more at 9 months)

-Return to heavy manual/physical labor type occupations without restrictions or as indicated by work hardening program and FCE results