

## Shoulder Arthroscopy: Debridement / Sub-Acromial Decompression / Distal Clavicle Resection Protocol

### 0-2 weeks post op

- Modalities as needed
- Sling until follow up with doctor
- RC isometrics into flexion, extension, abduction, adduction, IR/ER in neutral
- Scapular ex's - **elevation** with shrugs, **depression**, **protraction**, **retraction** with manual resistance
- PROM with shoulder pulleys
  - Flexion to 90°
  - Abduction to 90°
  - IR to 90°
  - ER to 45°
- Avoid horizontal adduction stretching for 6 weeks with Distal Clavicle Resection

### 3 weeks post op

- Cont. as above
- Begin AAROM ex's supine or standing with wand or wall walks
- RC ex's IR/ER with T-band or tubing with arm abducted 20-30°

### 4 weeks post op

- Cont. as above
- Advance ROM as tolerated
- Begin isotonic for Core RC strengthening advance the weight on all ex's to 6-8lbs, 5-6 sets of 15-20 reps
  - Flexion with thumb up - arm at 90°, flex arm forward fully, 12 O'clock position
  - Abduction to 100° with thumb up -- arm at 90° in prone, abduct arm into scapular plane levels with body, 2 O'clock position for right handed patients
  - Abduction to 45° with thumb up - arm at 90° in prone, abduct arm level with body, 4 O'clock position for right handed patients
  - Extension with arm at max ER - arm at 90° in prone, extend arm to level of body, 6 O'clock position
  - Scaption to 90° thumb pointing up, elevate arm in plane of scapula (empty can position)
  - Scaption to 60° thumb pointing down, elevate arm same as above but stop at 60°
  - Standing or Side lying ER externally rotate arm in 20-30° abduction (pillow helps with position)
- Begin isotonic for peri-scapular strengthening; progress as heavy as tolerated
  - Elevation - continue with shrugs vertical motion only do not roll shoulders
  - Depression - seated press ups hands at hips flat on floor, elbows locked, lift bottom off floor while moving only from scapulas, (not a dip motion), use hand blocks to increase height when able
  - Protraction - supine - 2" punches - arm flexed to 90°, elbow locked, motion is from scapula as arm is "punched" forwards, use hand weights, move to push ups with a plus (push up position and perform same movement with body weight) when able
  - Retraction - prone rows arm at 90°, elbow locked out or bent to 90°, use hand weight and retract scapulae pinching them together
- Proprioception ex's - rhythmic stabilization, physioball balance ex's etc

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**6 weeks post op**

- Cont. as above
- Full pain free ROM
- Begin conventional weight lifting with machine weights and progress slowly to free weights as desired
- Full ROM isokinetics (throwing wand for throwers) and advance to higher speeds when able

**8 weeks post op**

- Cont. with strengthening
- Begin interval throwing program if strength test passed

**Return to Sport/Activity**

- When cleared by physician
- Passing strength test if requested
- Completion of throwing program if requested
- NO pain with full ROM (Neer or Hawkins tests (-))