# POSTERIOR SHOULDER STABILIZATION CLINICAL PRACTICE GUIDELINE



# **Rehabilitation Precautions**

- Strict sling use for 6 weeks after procedure, proper use with shoulder in neutral rotation, not across belly.
- Sling removal for exercises, hygiene, dressing and elbow support activities such as writing or typing.
- Avoid any positions of horizontal adduction or internal rotation so as to not stress posterior capsule and labrum.
- Neither horizontal adduction nor internal rotation stretches until 10-12 weeks.
- Avoid any weight bearing thru the involved UE for 10-12 weeks.
- Isotonic strengthening at 8 weeks.
- Progression is time and criterion-based, dependent on soft tissue healing, patient demographics, and clinician evaluation

# Phase I: Weeks 0-6

ROM	<ul> <li>Education in performance of pendulums.</li> <li>Initiate PROM ER in neutral in supine.</li> <li>Initiate wand ER in supine.</li> <li>Limit wand supine FE to 90° for first 4 weeks</li> <li>Progress wand supine FE to 120° at weeks 4-6</li> </ul>
Strength	No isometric or isotonic strengthening
Goals to Progress	<ul> <li>Proper sling use</li> <li>Pain controlled</li> <li>Physician clearance for sling discharge at 6 weeks</li> </ul>

#### Phase II: Weeks 7-10

ROM	<ul> <li>Progress FE in supine to 180° as tolerated</li> <li>Progress ER at 90° of abduction</li> <li>AROM as tolerated without upper trapezius substitution.</li> <li>Continue avoidance of horizontal adduction and internal rotation movements or stress</li> <li>Avoidance of UE weight bearing exercises or positions</li> </ul>
Strength	<ul> <li>Neuromuscular re-education for RC and Scapular Stabilizers         <ul> <li>Rhythmic Stabilization in non provocative positions (90° FE, 120° FE and ER)</li> <li>Scapular PNF with manual resistance</li> </ul> </li> <li>Initiate dynamic isometrics with band</li> <li>Initiate light band exercises for ER and IR at neutral</li> <li>Initiate light band exercises for scapular stabilization (Row, Extension, Depression, Horizontal Abduction)</li> <li>Initiate standing scapular retraction to isolate middle traps</li> </ul>

Goals to Progress	<ul> <li>Functional AROM without upper trap</li> <li>No increased pain or soreness with initial isotonic exercises.</li> </ul>
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# Phase III: Weeks 10-12

ROM	<ul> <li>Continue terminal PROM stretches in all directions except horizontal adduction and internal rotation</li> <li>Initiate gentle stretching into horizontal adduction and internal rotation</li> </ul>
Strength	<ul> <li>Continue progression of Neuromuscular re-education for RC and Scapular stabilizers</li> <li>Progress ER and IR strengthening to 45° of abduction.</li> <li>Initiate band/weight strengthening into FE and Abduction</li> </ul>
Goals to Progress	<ul> <li>Full AROM and PROM</li> <li>Normalized arthrokinematics with daily activities</li> </ul>

# Phase IV: Weeks 12-17

ROM	Initiate inferior GH mobilizations to improve abduction if appropriate
Strength	<ul> <li>Initiate gentle CKC UE weightbearing exercises on wall</li> <li>Initiate Throwers 10 program (T, Y, Extensions, Row)</li> <li>Progress all endurance and neuromuscular exercises</li> <li>Initiate PNF diagonals with band and manual resistance</li> <li>Initiate Plyometric medicine ball program</li> </ul>
Goals to Progress	<ul> <li>No increased pain or compensations with addition of horizontal adduction and internal rotation stretches.</li> </ul>

# Phase V: Weeks 18+

ROM	Initiate inferior GH mobilizations to improve abduction if appropriate
Strength	<ul> <li>Initiate gentle CKC UE weightbearing exercises on wall</li> <li>Initiate Throwers 10 program (T, Y, Extensions, Row)</li> <li>Progress all endurance and neuromuscular exercises</li> <li>Initiate PNF diagonals with band and manual resistance</li> <li>Initiate Plyometric medicine ball program</li> </ul>
Goals to Progress	<ul> <li>No increased pain or compensations with addition of horizontal adduction and internal rotation stretches.</li> </ul>

ROM	<ul> <li>PROM as needed</li> <li>Progress all terminal stretches if needed</li> </ul>
Strength	<ul> <li>Initiate prone CKC UE weightbearing exercises</li> <li>Initiate supine bench press and military press</li> <li>Initiate lat pull down</li> <li>Initiate prone push-ups at 5-6 months.</li> <li>Initiate controlled falls onto therapy ball or ground, emphasis on landing with elbows flexed to absorb impact.</li> <li>Initiate and progress all sport specific drills specific to sport.</li> <li>Initiate throwing program or gradual return to sport if appropriate.</li> </ul>
Goals to Progress to Sport	<ul> <li>Physician clearance at 6 month check up for contact sports</li> </ul>

#### References

- Andrews JR, Harrelson G, Wilk KE; Physical Rehabilitation of the Injured Athlete, 3rd Ed. Philadelphia, PA, Saunders, 2004.
- Eckenrode BJ, Logerstedt DS, Sennett BJ. Rehabilitation and Functional Outcomes in Collegiate Wrestelers Following Posterior Shoulder Stabilization Procedure. JOSPT, July 2009.