

Accelerated Shoulder Postoperative Rehab Protocol

SURGICAL PROCEDURES

- Isolated arthroscopic debridement, subacromial decompression, distal clavicle resection
- Isolated biceps tenodesis
- Rotator cuff augmentation/repair with only a bioinductive collagen implant
- Clavicle ORIF
- Simple proximal humerus IMN

BACKGROUND

For patients who undergo a shoulder procedure with no significant tissue repair or with stable fracture fixation, such as those listed above, an accelerated rehab protocol is used. If a concomitant reparative procedure is performed, such as a rotator cuff or labral repair, then the Universal Shoulder Protocol is used. Slight variations in this protocol may be made at Dr. Schuette's discretion.

REHAB PROTOCOL

Immediate Postoperative Phase: Weeks 0-2

Goals	<ul style="list-style-type: none"> • Protect the surgical site and ensure wound healing • Limit pain and inflammation • Prevent stiffness
Sling	<ul style="list-style-type: none"> • Use sling when up and walking and when sleeping • Come out of sling 3-5 times a day for light stretching
Range of Motion	<ul style="list-style-type: none"> • Gentle PROM with help from another individual • No aggressive stretching is allowed. If the patient feels that the stretch is at the end of their comfortable ROM, then the motion is halted at that position and held for approximately 5-10 seconds. • PROM Limits <ul style="list-style-type: none"> ○ Forward flexion/abduction/elevation: 120 degrees ○ External rotation: 30 degrees ○ Internal rotation to the abdomen • Ok for hand, wrist, and elbow AROM • Biceps Tenodesis Restriction: <ul style="list-style-type: none"> ○ No active elbow flexion until 4 weeks postop
Strengthening	<ul style="list-style-type: none"> • No strengthening

Progressive Motion Phase: Weeks 2-6

Goals	<ul style="list-style-type: none">• Restore non-painful range of motion• Decrease pain and inflammation• Regain independence with activities of daily living
Sling	<ul style="list-style-type: none">• Patient should wean from sling unless otherwise specified
Range of Motion	<ul style="list-style-type: none">• Active assist range of motion (AAROM) can begin• Progress to AROM at 4 weeks once full PROM achieved• Biceps Tenodesis Restrictions<ul style="list-style-type: none">◦ No active elbow flexion until 4 weeks postop
Strengthening	<ul style="list-style-type: none">• Beginning at 4 weeks• Isometrics: scapular musculature, deltoid, and rotator cuff• Isotonic: light resistance band internal and external rotation in 0 degrees of abduction• Biceps Tenodesis Restrictions<ul style="list-style-type: none">◦ No resisted biceps flexion or forearm supination for 6 weeks postop

Progressive Strengthening Phase: Week 6-12

Goals	<ul style="list-style-type: none">• Improve strength, power, and endurance• Improve neuromuscular control• Prepare for sports specific activities
Range of Motion	<ul style="list-style-type: none">• Ensure full, painless AROM at this point
Strengthening	<ul style="list-style-type: none">• Patient may progress strengthening as tolerated if full, painless ROM and no pain or tenderness on examination.• Exercises<ul style="list-style-type: none">◦ Dumbbell strengthening◦ Resistance band exercises to 90/90 position for IR and ER◦ Plyometrics for rotator cuff◦ Continued endurance exercises• Weight limit<ul style="list-style-type: none">◦ 5 pounds• Biceps Tenodesis Restrictions<ul style="list-style-type: none">◦ Gentle, light biceps strengthening during weeks 6-12.

Return to Sport and Strength Phase: Week 12+

Goals	<ul style="list-style-type: none">• Continue to build strength• Progressive return to full sport and exercise
Range of Motion	<ul style="list-style-type: none">• Ensure full, painless AROM at this point
Strengthening	<ul style="list-style-type: none">• Advance strength training and activities as tolerated<ul style="list-style-type: none">◦ No weight limit but increase weight in a progressive manner• Progress sports specific training and activities
Return to Sport/Heavy Work	<ul style="list-style-type: none">• Typically, at 12 weeks unless cleared sooner by Dr. Schuette

Please have physical therapist call Dr. Schuette's office with any questions: (952) 442-6943