PHYSICAL THERAPY PRESCRIPTION

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PATIENT STICKER

Diagnosis: (LEFT / RIGHT)

SCAPULAR MUSCLE REHABILITATION PHYSICAL THERAPY PRESCRIPTION

Scapular Muscle Reh	abilitation: (1) Isometrics	(2) Closed Chain (3) Open Chain
Include manual thera	apy and active release	
Isometrics: Scapular Shrug (Ele	Pinch (Retraction) evation)	
	ction, Depression, Protract	on the wall >> Scapular elevation, tion
	ics eptive Neuromuscular Faci s: Pulldown, Upright rows,	
Progress to Rotator (Cuff strengthening after Sc	capular strengthening is in progress.
	er entire kinetic chain. Sta inal strengthening.	art rehabilitation with emphasis on leg, low back,
Treatment:	times per week	Home Program
Duration:	weeks	
•	e: D, Attending Orthopaedic	