

# PHYSICAL THERAPY PRESCRIPTION

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**Diagnosis:** ( LEFT / RIGHT ) Impingement Syndrome Shoulder / Rotator Cuff Tendonitis

**DATE:** \_\_\_\_\_

## SHOULDER PHYSICAL THERAPY PRESCRIPTION

- \_\_\_ Range of Motion (Increase IR)    Active / Active-Assisted / Passive
  - \_\_\_ Rotator Cuff and Scapular stabilization program exercises, begin below horizontal
  - \_\_\_ Progress to 45 / 90 as tolerated in pain free arc
  - \_\_\_ Begin with Isometrics for Rotator Cuff
    - Progress to Theraband, then to Isotonics
    - Limit ER to neutral if (+) Biceps Tendonitis
  - \_\_\_ Progress to Deltoid, Lats, Triceps, and Biceps
    - Progress scapular stabilizers to Isotonics below horizontal
  - \_\_\_ Posterior Capsule stretching after warm-up
  - \_\_\_ Return to Sport Phase:
    - Emphasize eccentric Rotator Cuff and scapula stabilization exercises
    - Sport specific strengthening with Theraband
    - Plyometric program for overhead athletes
  - \_\_\_ Modalities prn
- Treatment:** \_\_\_\_\_ times per week                      \_\_\_ Home Program
- Duration:** \_\_\_\_\_ weeks

**Physician's Signature:** \_\_\_\_\_  
**Frank Petrigliano, MD, Attending Orthopaedic Surgeon, UCLA**