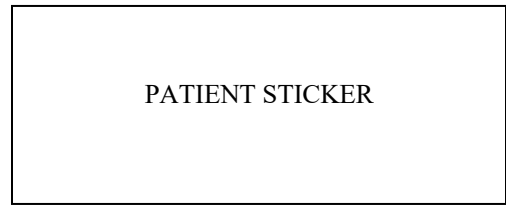


PHYSICAL THERAPY PRESCRIPTION

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DIAGNOSIS (LEFT / RIGHT) ARTHROSCOPIC LABRAL REPAIR (ANTERIOR – POSTERIOR – SLAP)

DATE OF SURGERY _____

ARTHROSCOPIC SHOULDER SURGERY PHYSICAL THERAPY PRESCRIPTION

PHASE I (0-2 WEEKS POST-OP) :

- Immobilization for 2-3 weeks
- Elbow ROM: Active/Active-Assisted Extension : passive flexion and supination; **no active flexion or supination x 4 weeks.**
- Shoulder ROM: Limit ER to neutral, Passive FE in Scapular plane to 120 degrees only; passive ER to neutral
- Deltoid isometrics
- Hand, Wrist, Gripping exercises
- Modalities, Cryocuff / Ice, prn

PHASE II (2-4 WEEKS POST-OP) :

- At 2-4 weeks Passive ROM : pulley for Flexion, Pendulum exercises
- Pool exercises: PASSIVE ROM Flexion in plane of scapula to 140, Abduction to 90 Extension, Horizontal abduction to 90, passive ER from 0 to 20 degrees with wand. Elbow extension. Passive Flexion/supination
- Deltoid isometrics
- Continue with Wrist exercises
- Modalities as needed
- Discontinue sling @ **3-4 weeks**

PHASE III (4-6 WEEKS POST-OP) :

- At 4-6 weeks, progress to gradual Active-Assisted with wand /Passive ROM to improve ER with arm at side (limit to 60 degrees ER)
- Progress Flexion to 160 degrees; Abduction 120, ER 45

PHYSICAL THERAPY PRESCRIPTION

PHASE V (6-12 WEEKS POST-OP)

- Gradual Active/Active-Assisted/Passive ROM to improve ER with arm in 45 degrees ABD
- Pool exercises: Active ROM in all directions below Horizontal, light resisted motions in all planes
- AROM activities to restore Flexion, IR, Horizontal ADD
- Deltoid, Rotator Cuff isometrics progressing to isotonics
- PRE's for Scapular muscles, Latissimus, Biceps, and Triceps
- PRE's working Rotators in isolation (use modified neutral)
- Joint mobilization (posterior glides)
- Emphasize posterior cuff, Latissimus, and Scapular muscle strengthening, stressing eccentrics
- KEEP ALL STRENGTH EXERCISES BELOW THE HORIZONTAL PLANE IN THIS PHASE

PHASE IV (12-16 WEEKS POST-OP) :

- Active ROM activities to restore full ROM
- Restore scapulohumeral rhythm
- Joint mobilization
- Aggressive scapular stabilization and eccentric strengthening program
- PRE's for all upper quarter musculature (begin to integrate upper extremity patterns)
 - Continue to emphasize eccentrics and glenohumeral stabilization
 - All PRE's are below the horizontal plane for non-throwers
- Begin isokinetics
- Begin muscle endurance activities (UBE)
- Continue with agility exercises
- Advanced functional exercises
- Isokinetic test
- Functional test assessment
- Full return to sporting activities when strength and motion are 90-95% normal.
- Begin throwing/gym program
- Sports-specific exercise

ADDITIONAL INFORMATION / INSTRUCTIONS:

Treatment: _____ times per week Duration: _____ weeks

Physician's Signature: _____

Frank A. Petrigliano, MD, Attending Orthopaedic Surgeon, UCLA