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# Physical Therapy Protocol - Superior Capsular Reconstruction

<b>Diagnosis:</b> R / L superior capsular reconstru	uction	Date of Procedure:
Frequency: 2-3 Times Per Week for	weeks, beginning 6 weeks after surge	ery

Weeks 0-6: period of protection, NO THERAPY for 6 weeks

- Sling with pillow at all times except hygiene for 6 weeks
- Range of Motion: No shoulder ROM allowed; elbow/forearm/wrist/hand motion ONLY
- Exercises: pendulums and grip strengthening; NO shoulder strengthening, or motion exercises permitted

### Weeks 6-12:

- Ok to wean out of sling unless in crowd or slippery environment
- Range of motion: PROM→AAROM only, including FF, ER, and ABD within a comfortable range; NO AROM
- **Exercises:** continue pendulums; begin scapular exercises including elevation with shrugs, depression, retraction, and protraction; no resistance exercises before 3 months
- Modalities: per therapist to include e-stem, ultrasound, heat before and ice following therapy

#### Weeks 12-14:

- Range of motion: progress to PROM and begin AROM slowly
  - o Week 12-13: perform while supine
  - Week 13-14: perform while back is propped up to 45 degrees, then advance to upright position
  - o Utilize unaffected arm, stick, or cane to move postoperative arm into FF, ER, and Abd
- **Exercises**: progress from above, no strengthening yet
- Modalities: per therapist to include e-stem, ultrasound, heat before and ice following therapy

### Weeks 14-18:

- Range of Motion: Continue AROM in all planes with slow, graduated progression
- Therapeutic Exercises: begin isometric exercises with use of pillow or folded towel under arm without moving the shoulder
- Modalities: per therapist to include e-stem, ultrasound, heat before and ice following therapy

## Weeks 18-22:

- Range of Motion: progress to full, painless, AROM
- Therapeutic Exercises: begin gentle resistance exercises, including resisted scapular strengthening, RTC strengthening, deltoid strengthening; these should be done 3 days/week with rest between sessions, no full or empty can exercises as these place too much stress on the RTC
- Modalities: per therapist to include e-stem, ultrasound, heat before and ice following therapy