

Rehabilitation Following Arthroscopic Subscapularis Repair *

*NOTE: Rate of rehab progression may be altered based on acute repair v. chronic tear repair

Precautions:

- 1) Excessive passive ER motion
- 2) Forceful IR movement or contraction
- 3) Excessive horizontal abduction motion
- 4) No pushing movements for 12 to 14 weeks

I. Phase I – Immediate Postoperative Phase

Goals: Protect the surgical procedure

Minimize the effects of immobilization Diminish pain and inflammation

Establish baseline proprioception and dynamic stabilization

Control ER ROM and active IR

Week 0-2

- Sling for comfort 4 weeks based on Physician's decision
- Wear immobilizer for sleep (4 weeks) **Physician decision
- Elbow/hand ROM
- Gripping exercises
- Passive ROM and active assistive ROM (L-bar)
 - Flexion to tolerance 0-90 degrees week 1, 0-100 degrees week 2
 - IR PROM only to about 25-30 degrees by 2 weeks
 - No passive ER beyond 0 degrees
- Submaximal isometrics (Flexion, Abduction, ER)
- No IR isometrics for 6 weeks
- No biceps strengthening, no active elbow flexion for 4 weeks
- Rhythmic stabilization (ER/IR) & (Flex/Ext)
- ER/IR proprioception drills
- Cryotherapy modalities as needed

Week 3-4

- Gradually progress ROM caution with passive ER
 - Flexion to 120-140 degrees
 - ER at 45 degrees abd scapular plane to 0 degrees
 - IR at 45 degrees abd in scapular plane to 45-60 degrees
 - · Initiate light isotonics for shoulder musculature
 - · Tubing for ER to neutral rotation
 - · Abduction, full can, & prone rowing
 - Dynamic stabilization exercises

Week 5-6

- Progress ROM as tolerated (progress active flexion)
 - Flexion to 160 degrees (tolerance)



- ER/IR at 45 degrees abduction:
 - IR at 45 deg of abduction to full (motion to side)
 - ER at 45 deg of abduction to 30-35 degrees
- Continue self capsular stretching (light stretching)
- Progress all strengthening exercises
 - Fundamental Shoulders or Throwers ten program
 - Continue isotonic strengthening
 - Dynamic stabilization exercises
 - Close kinetic chain exercises
 - Wall stabilization
- Progress ROM to:
 - Flexion: 165-175 degrees

Week 7-8

- Begin ER/IR at 90 deg of abduction (PROM light ROM)
 - o ER to 45-50 deg
 - o IR to 50-55 deg

II. Phase II – Intermediate Phase

Goals: Reestablish full ROM

Normalize arthrokinematics Improve muscular strength Enhance neuromuscular control

Week 8-10

- Progress to full ROM (week 8) flexion 180 degrees, ER at 90 to 75-80 degrees, IR to 55 degrees
- Continue all stretching exercises
 - Joint mobilization, capsular stretching, passive and active stretching
- In overhead athletes, maintain 90-100 degrees ER
- Continue strengthening exercises
 - Throwers ten program (for overhead athlete)
 - Isotonic strengthening for entire shoulder complex
 - May begin light biceps and IR isotonics
 - PNF manual technique
 - Neuromuscular control drills
 - Isokinetic strengthening

Week 10-14

- Progress to full ROM
- Continue all flexibility exercises
- Continue all strengthening exercises
 - May begin to increase weight for biceps and IR
- May initiate light isotonic machine weight training (week 14)

III. Phase III – Advanced Strengthening Phase (Months 4-6)

Goals: Enhance muscular strength, power and endurance Improve muscular endurance Maintain mobility



Criteria to Enter Phase III

- 1) Full range of motion
- 2) No pain or tenderness
- 3) Satisfactory stability
- 4) Strength 70-80% of contralateral side

Week 14-20

- Continue all flexibility exercises
 - Self capsular stretches (anterior, posterior, and inferior)
 - Maintain ER flexibility
- Continue isotonic strengthening program
- Emphasis muscular balance (ER/IR)
- Continue PNF manual resistance
- May continue plyometrics
- Initiate interval sport program (physician approval necessary) week 16

Week 20-24

- Continue all exercise listed above
- Continue and progress all interval sport program (throwing off mound)

IV. Phase IV – Return to Activity Phase (Months 6-9)

Goals: Gradual return to sport activities Maintain strength and mobility of shoulder

Criteria to Enter Phase IV

- 1) Full non-painful ROM
- 2) Satisfactory stability
- 3) Satisfactory strength (isokinetics)
- 4) No pain or tenderness

Exercises

- Continue capsular stretching to maintain mobility
- Continue strengthening program
- Either throwers ten or fundamental shoulder exercise program
- Return to sport participation (unrestricted)