

PHYSICAL THERAPY PRESCRIPTION



UC Irvine Health

Dean Wang, M.D.

Orthopaedic Surgery and Sports Medicine

Appointments: 714-456-7012 (Orange) || 949-515-5210 (Costa Mesa)

Office: 714-456-7012

Fax: 714-456-8711

CA License: A124076



OPEN ANTERIOR SHOULDER STABILIZATION PROTOCOL

Surgical Date: _____

Side: Right Left

Diagnosis: Open anterior shoulder stabilization

Postop	Goals	Precautions	Exercises
Weeks 0-3 HEP daily	Edema and pain control Protect surgical repair Sling immobilization	Sling at all times including sleep Remove to shower (arm at side) ER to 20° No active and resisted IR	Elbow, wrist, hand ROM Gripping exercises
Weeks 3-6 HEP daily	Protect surgical repair FF 145°, ER 50°	Sling except shower & exercises DC sling at 4 weeks No ER >50° No backward extension Avoid anterior capsule stretch No active and resisted IR	AAROM FF and ER Scapular stabilization Submaximal biceps, triceps, deltoid Gentle gradual ER: 0° abduction → max 50° 90° abduction → max 50° Posture training
Weeks 6-12 HEP daily	Full ROM Scapulohumeral rhythm Restore strength 5/5	No sling Avoid painful ADL's Avoid rotator cuff inflammation Avoid excessive passive stretching	AAROM IR Rotator cuff/periscapular stabilization Humeral head rhythmic stabilization Resistive exercise for scapula, biceps, triceps, and rotator cuff below horizontal plane
Weeks 12-18 HEP daily	Full ROM and strength Improve endurance Prevent re-injury	No sling Avoid painful activities OK to cycle/run at 12 weeks No contact/racket/throwing sports	Advance UE strengthening as tolerated ER/IR in 90/90 position Begin upper body ergometer (UBE) Initiate plyometrics Sport specific activities Throwing/racquet program 4-5 months
Weeks 18+ HEP daily	Return to play	No restrictions Return to sport (MD directed)	Maintain ROM, strength, and endurance

Frequency & Duration: 1-2 2-3 x/week for _____ weeks _____ Home Program

Physician's Signature: _____ **M.D.**