## PHYSICAL THERAPY PRESCRIPTION



Dean Wang, M.D.

Orthopaedic Surgery and Sports Medicine

Physician's Signature:\_\_\_\_\_

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

Office: 714-456-7012 Fax: 714-456-8711 CA License: A124076

PATIENT STICKER	

## ARTHROSCOPIC COMBINED ANTERIOR AND POSTERIOR SHOULDER STABILIZATION PROTOCOL

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Surgical Date:				
Side: ☐ Right ☐ Left				
Diagnosis: Arthroscopic Anterior and Posterior Shoulder Stabilization				

Diagnosis: Artifioscopic Afficinor and Posterior Shoulder Stabilization					
<u>Postop</u>	<u>Goals</u>	<u>Precautions</u>	<u>Exercises</u>		
Weeks 0-4 HEP daily	Edema and pain control Protect surgical repair Sling immobilization	Sling at all times including sleep Remove to shower (arm at side) Limit ER to neutral Limit IR to 30°	Elbow, wrist, hand ROM Gripping exercises		
Weeks 4-8 HEP daily	Protect surgical repair FF 145°, ER 30°	Sling except shower & exercises DC sling at 6 weeks No ER >30° No IR >45° No backward extension Avoid posterior capsule stretch	AAROM FF and ER Scapular stabilization Submaximal biceps, triceps, deltoid ER, and IR isometrics Gentle gradual ER/IR: 0° abduction → max 30°/45° 90° abduction → max 50°/30° Posture training		
Weeks 8-12 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	v & Duration: ☐ 1-2 ☐	2-3 x/week for weeks	Home Program		

M.D.