



HARVARD MEDICAL SCHOOL AND BRIGHAM AND WOMEN'S HOSPITAL

Posterior Stabilization Therapy Protocol

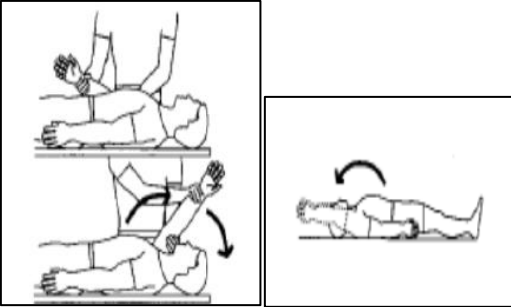
Instructions for Therapist


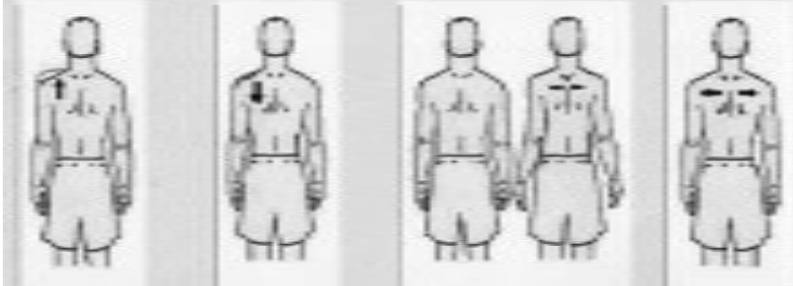
The MOON Shoulder Group is a collection of shoulder experts who study the best methods to treat patients after surgery for shoulder instability. Your patient is part of a group of patients being closely followed in order to determine which patients have the best and worst outcomes after surgery.

The patient is to begin therapy 2 weeks after surgery

The patient should work with therapist 1-3 x per week until released by surgeon

Do not add or skip any part of this program. If you have concerns please contact your surgeon, Dr. Carolyn Hettrich at (617)-525-3427.

Goals	The two main goals of this physical therapy program are to: (1) Have full active and passive range of motion by 3 months after surgery (2) Return to sport by 18-24 weeks after surgery
Sling Usage	Patients must wear their sling at all times, except when showering/bathing for 6 weeks. This does include while they are sleeping.
Ice	We encourage the use of the ice or the cryo cuff to help control pain and inflammation after surgery.
Questions/Concerns	If you have questions or concerns, please contact the patient's physician. Questions or concerns regarding the rehabilitation protocol may be sent to the MOON Shoulder Group research hub 859-xxx-xxxx
0-2 weeks	Wrist and elbow ROM only
2 weeks	Passive and Active assistive forward elevation to 90° 
4 weeks	Passive and Active assistive forward elevation to 120° Passive and Active assistive abduction to 90°

		<p>Isometric within pain tolerance but no External Rotation and No combined Abduction and Internal Rotation</p>
<p>6 weeks</p>	<ul style="list-style-type: none"> • May discontinue sling usage, unless in a crowd, or on slipper surface • Unlimited Passive and Active assistive forward elevation • May begin active motion in all planes • Progressive Resistive Exercise but NO ER or IR • Scapular stabilizers – Elevation / Depression / Retraction / Protraction  <ul style="list-style-type: none"> • Therapist may perform anterior glide joint mobilization but not posterior mobilization to facilitate full range of motion if needed 	
<p>8 weeks</p>	<ul style="list-style-type: none"> • Passive / Active assistive internal rotation to 30° with arm at side • Passive / Active assistive internal rotation at 45° abduction to 30° • Continue progressing other active motions 	
<p>12 weeks</p>	<ul style="list-style-type: none"> • Passive / Active internal rotation is not limited • Progressive Resistive Exercises add External Rotation and Internal Rotation 	
<p>14 weeks</p>	<ul style="list-style-type: none"> • May begin sport specific exercise • Therapist may perform posterior glide joint mobilization if necessary to gain full functional motion 	
<p>20 -24 weeks</p>	<ul style="list-style-type: none"> • Return to play sports with approval of physician 	