

**POSTERIOR LABRAL REPAIR PROTOCOL**

This protocol provides general guidelines for initial stage and progression of rehabilitation according to specified time frames, related tissue tolerance and directional preference of movement. The intent is to provide the therapist with a general framework. Twin Cities Orthopedics staff will provide contact information for further individual-specific rehabilitation progression consultation and general questions regarding specific patients. Please fax initial assessment and subsequent progress notes directly to Dr. Corey Wulf at 952-944-0460.

**PHASE I: Weeks 1-2 (Inflammatory Phase)****Precautions**

- PROM only
- Flexion 30° - Abduction 90° - Scaption 90° - ER 30° - IR 0° - Adduction 0°
- Abduction pillow sling at all times (including sleep) with arm in slight abduction and neutral position

**Manual Therapy**

- PROM shoulder within precautions
- PROM scapula
- PROM elbow, wrist, and hand
- STM periscapular and cervical muscles
- Compression

**Therapeutic Exercises**

- Hand gripping exercises, active elbow and wrist flexion/extension ROM
- Codman/pendulums **PASSIVE only**
- Postural correct education
- Scapular joint position sense (use mirror)

**Modalities**

- IFC estim for pain PRN
- Ice 10 minutes every hour as necessary
- High-volt estim for edema control
- Vasocompression/cryotherapy unit

**PHASE II: Weeks 3-4 (Inflammatory and Proliferative Phase)****Precautions**

- Flexion 90° - Abduction 100° - Scaption 120° - ER 30° - IR 0° - Adduction 0°
- Abduction pillow sling at all times (including sleep) with arm in slight abduction and neutral position

**Manual Therapy**

- PROM shoulder within precautions

## **PHASE II: Weeks 3-4 (cont.)**

- PROM scapula
- STM periscapular and cervical muscles
- Scapular PFN patterns
- Glenohumeral joint centering and compression
- Glenohumeral joint position sense

### **Therapeutic Exercises**

- Hand gripping exercises, active elbow and wrist flexion/extension ROM
- Codman/pendulums
- Postural correct education
- Cardiovascular activity 30 min/day stationary bike or walking on level ground
- Table slides abduction/flexion
- Gentle isometrics for ER/IR modified scapular plane
- AROM elbow flexion, extension, supination, and pronation
- Active trunk rotation
- Ipsilateral levator and upper trapezius stretching
- Seated scapular retraction/decompression (scapular clocks) and scapular dumps
- Passive joint position sense

### **Modalities**

- IFC estim for pain PRN
- Ice 10 minutes every hour as necessary
- High-volt estim for edema control
- Vasocompression/cryotherapy unit

## **PHASE III: Weeks 5-8 (Early Remodeling Phase)**

### **Precautions**

- Flexion 120° - Abduction 120° - Scaption 140° - ER 45° - IR 0°
- Progress to full ROM week 7
- May discontinue sling at 6 weeks

### **Manual Therapy**

- Glenohumeral PROM all planes
- Scapular PROM/mobilizations
- Scapular PNF patterns
- STM to pectoralis, latissimus, cervical, and periscapular muscles
- **Progress at 7 weeks to include:**
  - Manual PROM to full flexion/abduction and ER/IR at 45 degrees abduction
  - Glenohumeral mobs inferior and anterior capsule
  - Stretching of pectoralis and latissimus

### **Therapeutic Exercises**

- Pulleys
- Table slides abduction/ flexion/ scaption

### **PHASE III: Weeks 5-8 (cont.)**

- AAROM flex/ abduction/ ER via cane and progress to AROM, wall walks and standing two way
- Prone and standing scapular squeezes
- Prone row and prone abduction
- Wall slides for lower trapezius
- Submaximal isometrics at neutral rotation and 30 degrees abduction for flexion, abduction, ER, and extension
- Sidelying ER with scapular positioning and no resistance

#### **Modalities**

- Moist heat with pulleys for warm-up
- IFC PRN for pain
- Ice after PT session and HEP

### **PHASE IV: Weeks 8-12 (Remodeling and Maturation Phase)**

#### **Precautions**

- Avoid end-range exercises
- Horizontal adduction 20 degrees

#### **Manual Therapy**

- As per phase 2 until full PROM achieved
- Rhythmic stabilization/in quadruped/ PNF patterns

#### **Therapeutic Exercises**

- UBE
- Ball on wall
- Prone two way (middle and lower trapezius)
- Standing two way (flexion and scaption)
- Prone row with resistance
- Sidelying ER with resistance as tolerated
- Scapular squeeze with resistance
- B ER with TB
- Seated low row
- IR/ER at neutral and progress to 45° abduction with light resistance (may progress to 90° of abduction at 10 weeks)
- Supine punch at standing punch (serratus anterior)
- Begin throwers 10 program at week 10: PNF patterns D1/D2, ER/IR at 45° of abduction, scaption with IR limited to 30° of abduction, seated press-ups, elbow and biceps flex, triceps extension
- Latissimus pull-downs in front of body
- Active joint position sense

#### **Modalities**

- Heat with UBE for warm-up
- Ice after PT session

## **PHASE V: Weeks 13-16 (Maturation Phase)**

### **Precautions**

- None

### **Manual Therapy**

- Manual capsular mobilization for full mobility
- Rhythmic stabilization in end ranges

### **Therapeutic Exercises**

- Throwers 10: progress resistance as tolerated
- May begin push-up progression
- Sleeper stretch and cross-chest stretch
- May progress ER/IR resistance to 90° of abduction
- Begin plyometrics: shot toss and progress to shot throw and overhead toss
- Dynamic wall push-ups
- Progress push-ups to floor as tolerated

### **Modalities**

- Ice PRN

## **PHASE VI: Weeks 17-24 (Remodeling, Maturation, and Hypertrophic Phase)**

### **Precautions**

- None

### **Manual Therapy**

- Manual stretching/PNF/rhythmic stabilization PRN

### **Therapeutic Exercises**

- Begin plyometrics: shot toss and progress to show throw and overhead toss
- Sport specific training
- Maximize cardiovascular fitness
- Gentle overhead motions and may progress to full over-head serve, swing, or throw at 20 weeks and full sports at 6 months

### **Modalities**

- Ice PRN