



Indiana University Health

IU Health Physicians Orthopedics & Sports Medicine

SUPERIOR CAPSULAR RECONSTRUCTION

PHYSICAL THERAPY PROTOCOL

Bryan M. Saltzman, M.D.

Indiana University Health Physicians
Assistant Professor of Orthopaedic Surgery, Indiana University
Sports Medicine, Cartilage Restoration, Shoulder/Elbow
IU Health Methodist Hospital – 1801 N Senate Ave, Indianapolis, IN 46202
IU Health North – 201 Pennsylvania Pkwy #100, Carmel, IN 46280
317-944-9400

www.bryansaltzmanmd.com

Patient Name:	Date of Surgery:
Evaluate and Treat	Provide patient with home program
Frequency: surgery	x/week xweeks <u>beginning 6 weeks after</u>

WEEKS 0–6: Period of protection → no therapy for the first 6 weeks

- Sling with abduction pillow: Must wear at all times except for hygiene
- Range of Motion: No shoulder ROM allowed; elbow/forearm/wrist/hand motion ONLY
- Exercises: pendulums and grip strengthening; NO shoulder strengthening or motion exercises permitted



THERAPY Phase I (Weeks 6 – 12 after surgery):

- Sling with abduction pillow: Discontinue
- Range of Motion: PROM only, including FF, ER, and ABD (within a comfortable range); No AROM/AAROM
- **Exercises:** continue pendulums; begin scapular exercises including elevation with shrugs, depression, retraction, and protraction; no resistance exercises before 3 months
- Modalities: Per therapist, including electrical stimulation, ultrasound, heat (before), ice (after)

THERAPY Phase II (Weeks 12 – 14 after surgery):

- o Week 12-13: perform while supine
- o Week 13-14: perform while back is propped up 45°; then advance to upright position
- Use unaffected arm, stick, or cane to move postoperative arm into FF, ER, and ABD
- Therapeutic Exercises: Progress Phase I exercises; no shoulder strengthening yet
- Modalities: Per therapist, including electrical stimulation, ultrasound, heat (before), ice (after)

THERAPY Phase III (Weeks 14 – 18 after surgery):

- Range of Motion: Begin to AROM in all planes 5 progress slowly
- Therapeutic Exercises: Begin isometric exercises (use pillow or folded towel without moving the shoulder)
- Modalities: Per therapist, including electrical stimulation, ultrasound, heat (before), ice (after)

THERAPY Phase IV (Weeks 18 – 22 after surgery):

- Range of Motion: Progress to full, painless, AROM
- Therapeutic Exercises: Progress Phase III exercises, begin gentle resistance exercises, including resisted scapular strengthening, rotator cuff strengthening, and deltoid strengthening
 - Resistance exercises should be done 3 days/week, with rest between sessions
 - $_{\odot}\,$ Do not do full or empty-can exercises $\Rightarrow\,\,$ these place too much stress on the rotator cuff
- Modalities: Per therapist, including electrical stimulation, ultrasound, heat (before), ice (after)

^{*}If a distal clavicle excision is performed, horizontal adduction is restricted for 8 weeks post-op



If a biceps tenodesis is performed, avoid active flexion of biceps and eccentric loads on biceps for 6 weeks post-op *Limited return to sports activities during Phase IV if cleared by surgeon

, , ,	have examined this patient and physical therapy is uldwould not benefit from social services.
	Date:
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