**Subscapularis repair - rehabilitation programme**

# 0 – 6 weeks after surgery

* Begin passive motion 0-90° forward flexion supine **but the arm must be kept internally rotated during these exercises**
* Wear sling when walking or traveling,
* Otherwise remove sling with arm supported on a chair, table or pillow and use hand the hand can be used for eating, computer and paperwork etc
* Don’t move the shoulder too much.
* 3 times a day, wrist and hand exercises with a squeeze ball
* With the wounds covered by a waterproof dressing shower with arm resting in triangular sling or supported on the shower soap dish
* Physiotherapy to teach isometric muscle contraction of deltoid and scapular stabilizers, elbow and hand movement.

# 6 – 12 weeks after surgery

* No more sling, except if in a rowdy crowd situation.
* increase forward elevation 0-180 and begin external rotation from against tummy to 0\*

**No abduction for 4 months until all other movements are full**

**12 – 16 weeks after surgery**

* Continue stretching of the shoulder including to full ER by 16 weeks gently to protect Subscap repair
* Begin formal strengthening internal/external rotation, retraining of scapulo-thoracic rhythm and proprioception.
* Patient may walk / jog and swimming (breaststroke only)

# 16 – 24 weeks after surgery

* obtain full range of motion slowly over 24 weeks
* sports specific strength and endurance training (tennis overhead serve, freestyle swimming, surfing) when fully rehabilitated with respect to motion, strength & proprioception
* This usually does not occur until 6 months , 9 months for throwing.
* Patient may feel more comfortable with shoulder taped or strapped for sports