Shoulder Instability - Anterior Labrum Repair Protocol

	Phase I: weeks 1-3 Rest and Healing Phase	Phase II: weeks 4-6 Protective, Early Motion, and Early Strength Phase
Weight-Bearing and Immobilization	Sling immobilizer with pillow <u>at all times</u> except for PT/HEP exercises or for hygiene Non-weight-bearing	
Aerobic	• None	• None
Range of Motion (ROM) and Strengthening	 ROM Passive FF in scapular plane to 90° Passive ER and extension to neutral IR to stomach No cross-body adduction until 6 weeks Full hand, wrist, and elbow AROM Pain free submaximal deltoid isometrics Scapular pinches/squeezes 	 Continue Phase I exercises as necessary ROM AAROM ER to 45° (wand exercises) AAROM FF in scapular plane to 120° (wand exercises) Begin scapular stabilizing and side-lying exercises ER and IR isometrics in modified neutral (must be submaximal and pain-free)
Other	 Heat before and/or ice after PT sessions as needed Modalities as needed to reduce swelling and for muscle re-education Home Exercise Program (HEP) per discretion of Physical Therapist 	
Goals	Pain and inflammation controlProtection of tissue healingMinimize joint stiffness	 Continue protection of tissue healing Minimize pain and inflammation Progress ROM Continue light strengthening ER to 45° FF to 120° 4/5 ER and IR strength

	Phase III: weeks 7-12 Late Motion and Continued Strengthening Phase	Phase IV: months 3-12 Late Strengthening and Return-to- Sport Phase
Weight-Bearing and Immobilization	 Sling immobilizer with pillow <u>at all times</u> except for PT/HEP exercises or for hygiene Discontinue sling immobilizer at week 8 	• None
Aerobic	May begin stationary bikeMay begin elliptical machine at week 8	Begin walk-jog-run progression and progress to advanced conditioning as tolerated
Range of Motion (ROM) and Strengthening	 Continue Phase II exercises as necessary ROM AAROM FF in scapular plane to tolerance AAROM ER to tolerance Begin AAROM for IR Strengthening Progress scapular strengthening including closed chain exercises Begin light bands and isotonic ER/IR strengthening in modified neutral position (pain-free) Begin latissimus strengthening (progress as tolerated) Humeral head stabilization exercises 	 Continue Phase III exercises as necessary Progress to full functional ROM Strengthening Advance ER and IR strengthening to 90/90 position Continue general upper extremity strengthening program Begin additional closed-chain exercises Begin activity-specific plyometrics (eg. weighted ball toss) Begin proprioception (eg. Bodyblade) Begin sport-specific or activity-specific program (pain-free)
Other	 Heat before and/or ice after PT sessions as needed Modalities as needed to reduce swelling and for muscle re-education Home Exercise Program (HEP) per discretion of Physical Therapist 	
Goals	 Minimize pain and inflammation Full ROM 5/5 ER and IR strength Normal scapulohumeral rhythm/dynamics 	 Begin and progress with pain-free sport-specific or activity-specific program ER and IR strength equal to unaffected side Independent HEP

Other Sport-Specific Restrictions

- May return to throwing 4.5 months (18 weeks) after surgery
- May return to pitching from a mound 6 months (24 weeks) after surgery
- May return to contact sports 6-9 months after surgery