

Patient name:
Date of Surgery:
Surgery performed:

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Postoperative Rehab Protocol: Arthroscopic Repair Humeral Avulsion of the Glenohumeral Ligament

This is a general guideline. Certain patients may require extra attention to certain areas of their body or portions of the protocol. Always listen to your therapist, a protocol never replaces their good clinical judgement. Do not attempt to increase weight, perform a new exercise, or increase your range of motion without their direction.

1st POST-OP WEEK – Establish therapy within 5 days of surgery

- 1. Wound Check with therapy
- 2. Patient Education
 - Sling
 - Pain control as needed as block begins to subside
 - Icing 3 times/day for 20 minutes each or vascutherm more frequently
- 3. Exercises
 - Passive motion ONLY for the first three weeks
 - o <120 deg forward flexion
 - 0 <90deg abduction</p>
 - o <30deg external rotation</p>
- 4. Modalities ad lib per therapy

2 WEEKS POST-OP – first postoperative visit with Dr within 10-14 days of surgery

- 1. Wound inspection, remove sutures
- 2. Exercises
 - PROM restrictions as above
- 3. Grade I/II glenohumeral joint mobilizations as indicated

3 WEEKS POST-OP

- 1. Range of motion
 - Full PASSIVE forward flexion and ABduction to tolerance
 - LIMIT External Rotation at side to 40 degrees



<u>6 WEEKS POST-OP – 2nd postoperative visit</u>

- 1. WEAN from sling
- 2. Exercises
 - Active Assist and Active motion
 - LIMIT external rotation at side to 45 degrees

8-10 WEEKS POST-OP

Progressive strengthening

12 WEEKS POST-OP – 3rd postoperative visit

- 1. Exercises
 - Progressive resistance exercises and GRADUAL return to sport.
 - Throwing, Overhead and contact athletes should only return to previous levels of play once strength, confidence and motion have all returned to levels approximating 90% of the uninjured arm.