





Department of Orthopaedic Surgery Sports Medicine and Shoulder Service

Arthoscopic / Open Capsular Shift Rehab Protocol Prescription

Patient Name:	Date:
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Diagnosis: Glenohumeral instability Frequency: 2-3 visits/week Duration: 4 months

Post-operative Period

0 to 1 month:

- 1. 1 visit per week, everyday home program
- 2. External rotation sling is to be worn at all times, including for sleep, except when doing exercises
- 3. Active and passive range of motion of the neck, elbow, wrist and hand should be performed 5 times/day everyday
- 4. Avoid any active abduction, horizontal adduction, forward elevation, and internal rotation during this time period
- 5. Gentle passive pendulum exercises should be started at 2 weeks to be performed twice a day
- 6. Gentle passive elevation in the scapular plane (no pulleys) to 90 degrees and external rotation to 30 degrees (arm at side) may be started at 2 weeks
- 7. Icing program, 3 to 5 times a day, 30 minutes each after exercises

1 to 2 months:

- 1. Sling may be discontinued after 4 weeks
- 2. 2 to 3 visits per week, 5 times a week home program
- 3. Continue all exercises in previous phase (as described above)
- 4. Passive and active assisted range of motion can begin with limits from 15 degrees of horizontal abduction to full horizontal abduction to avoid stressing the posterior capsule (no internal rotation or shoulder adduction), full elevation in scapular plane (no internal or external rotation while arm is elevated), 45 degrees of internal or external rotation (arm at the side), and extension to 20 degrees
- 5. Isometric strengthening exercises can begin in this time period with the above limits of motion
- 6. Periscapular strengthening and range of motion exercises should begin including shoulder shrugs and scapular retraction exercises

2 to 4 months:

1. 2 to 3 visits per week, with a home program 5 times a week.