



# Matthew Varacallo MD Shoulder — Posterior Labral Repair Physical Therapy Protocol

## Phase I (0-6W): Protection

#### Goals

- Allow healing of sutured capsule
- Initiate early gentle protection range of motion
- Decrease pain and inflammation / cryotherapy 30 min on/off as much as possible

## Brace/Sling

- Discontinue use after four weeks (unless otherwise instructed)
- Sleep in brace for first four weeks -

o Remove for showering – during this time, perform ROM of elbow/wrist/fingers

## Range of motion parameters/goals:

## Week 1

- Flexion: 90 degrees
- External rotation: 25 to 30 degrees
- Internal rotation: 0 degrees

#### Week 3

Internal rotation: 15 degrees

#### Week 4

- Flexion to tolerance
- External rotation: 45 to 60 degrees
- Internal rotation: 35 degrees
- Abduction: 90 degrees

## Exercises

- Shoulder retraction activation including manual scapula strengthening and isolated scapula strengthening
- Elbow/wrist/hand exercises
- Passive and gentle active assistive range of motion exercises per guidelines above
- Cervical spine/paraspinal strengthening and ROM

## Week 6

- External rotation to tolerance
- Internal rotation: 60 degrees
- Abduction to tolerance
  Exercises
- Continue passive and gentle active assistive range of motion exercises per guidelines above
- Continue scapular/periscapular strengthening; OK for both open and close chain
- Trunk stabilization/Core strengthening exercises
- Wand active assisted exercises (T-bar, table slides, swiss ball, pulleys etc)

Gentle joint mobilizations (AVOID posterior glides)

- Side lying external rotation/abduction
- Continue cryotherapy for pain management

## Phase II (7-12W): Intermediate Phase

#### Goals

- Full, non-painful range of motion by week 8
- Increase strength and proprioception
- Improve neuromuscular control / scapulothoracic / scapulohumeral rhythm
- Eliminate shoulder pain

## \*Range of motion parameters/goals:

## 7-10 weeks:

- Restore full range of motion by week 8
- Exercises
- Gradually progress range of motion per the guidelines above
- Continue joint mobilizations
- Initiate external rotation/internal rotation tubing exercises (arm at side)
- Initiate isotonic dumbbell program:
- Shoulder abduction, flexion
- Latissimus dorsi
- Rhomboids
- Biceps
- Triceps
- Shoulder shrugs
- Wall push ups
- Progress neuromuscular control exercises for the scapulothoracic joint

## 10-12 weeks:

#### Exercises

- May progress with more aggressive strengthening
- Tubing exercises for rhomboids, latissimus dorsi, biceps, triceps Exercises
- Continue all stretching exercises (progress range of motion to functional demands)

## Phase III (12-16W): Dynamic Strengthening and Progressive Functional Return

#### \*\*Criteria to Progress to Phase III\*\*

- Full, non-painful range of motion
- No pain or tenderness
- Muscular strength to 70% of contralateral side

#### Goals

- Improve muscular strength, power and endurance
- Improve neuromuscular control

## Weeks 12 to 16

#### Exercises

- Continue all stretching exercises (capsular stretches)
- Continue exercises as listed above
- Fundamental exercises
- Endurance training

## Phase IV (4-6 months and beyond): Progressive Functional Return

#### Goals

- Full, non-painful range of motion
- Satisfactory static stability
- Satisfactory clinical exam
- No pain or tenderness
- Possible return to most sports/activities after 4 months unless otherwise instructed by Dr. Varacallo (e.g. FULL contact return to collision/high-impact sports is typically closer to 6 months)

#### Exercises

- Continue exercises as listed above
- Emphasis on gradual return to recreational activities and sport-specific activitie
- Continue isotonic strengthening program
- Plyometric strengthening
- Initiate interval sport programs