

Open Anterior Capsular Shift Rehabilitation Protocol

Phase I (Weeks 0-6)

- Protection Phase
 - o Goals: Allow healing of sutured capsule
 - o Begin early protected and restricted range of motion
 - o Retard muscular atrophy and enhance dynamic stability
 - o Decrease pain/inflammation
 - o Brace: Patients are placed in shoulder immobilizer for 4-6 weeks
- Week 0-3
 - o Precautions:
 - Sleep in sling for 4 weeks
 - No overhead activities for 3 weeks. Compliance to rehab program is critical.
 - o Exercises:
 - Gripping exercises with putty
 - Elbow and wrist flex/extension and pronation/supination
 - Pendulum exercises (non-weighted)
 - No shoulder abduction or extension
 - AROM cervical spine
 - Shoulder isometrics-Flexors, extensors, ER, ABD
 - No active or active assisted IR x 6 weeks
- Week 4-6
 - o Goals:
 - Gradual increase in ROM
 - Normalize arthrokinematics
 - Improve strength
 - Decrease pain/inflammation
 - o Range of Motion Exercises
 - L-bar active assisted exercises, gentle PROM exercises
 - ER to 25-30 degrees in scapular plane
 - IR to 30-35 degrees in scapular plane
 - Shoulder flexion to 105-115 degrees
 - Shoulder elevation in scapular plane to 115 degrees
 - Rope and pulley flexion
 - *All exercises performed to tolerance and therapist/physician motion guidelines
 - *Take to point of pain and/or resistance and hold
 - *GENTLE self-capsular stretches
 - o Gentle Joint Mobilization to Re-establish Normal Arthrokinematics to:
 - Scapulothoracic joint
 - Glenohumeral joint
 - Sternoclavicular joint
 - o Strengthening Exercises
 - Isometrics
 - Rhythmic stabilization exercises
 - May initiate tubing for ER/IR at 0 degrees
 - o Conditioning Program for:
 - Trunk

- Lower extremities
- Cardiovascular
- o Decrease Pain/Inflammation
 - Ice, NSAID, modalities

Phase II (Weeks 7-12)

Intermediate Phase

- Goals
 - o Full non-painful ROM at week 10-12
 - o Normalize arthrokinematics
 - o Increase strength
 - o Improve neuromuscular control
- Week 7-8
 - o Range of Motion Exercises
 - L-Bar active assisted exercises at 60-90 degree ABD
 - Continue all exercises listed above
 - Gradually increase ROM to full ROM week 12
 - Continue self-capsular stretches
 - Continue joint mobilization
 - May initiate IR/ER ROM at 90 degrees of abduction
 - o Strength Exercises
 - Initiate isotonic dumbbell program
 - Side-lying ER/IR
 - Shoulder abduction
 - Supraspinatus
 - Latissimus dorsi
 - Rhomboids
 - Biceps/triceps curls
 - Shoulder shrugs
 - Push-ups into chair (serratus anterior)
 - Continue tubing at 0 degrees for ER/IR
 - Continue stabilization exercises for the glenohumeral joint
 - o Initiate Neuromuscular Control Exercises for Scapulothoracic Joint
- Week 8-10
 - o Continue all exercises listed above, emphasize neuromuscular control drills and scapular strengthening
 - o Initiate tubing exercises for rhomboids, latissimus dorsi, biceps and triceps
 - o Progress ROM to full ROM as tolerated
 - ER at 90 degrees ABD: 80-85 degrees
 - IR at 90 degrees ABD: 70-75 degrees
 - Flexion to 165-170 degrees

Phase III (Weeks 12-20)

- Dynamic Strengthening Phase
- Week 12-17
 - o Goals:
 - Improve strength/power/endurance
 - Improve neuromuscular control
 - Prepare athletic patient for gradual return to sports
 - o Criteria to Enter Phase III:
 - Full non-painful ROM
 - No pain or tenderness
 - o Emphasis of Phase III
 - Dynamic stabilization exercises
 - Eccentric exercises
 - Diagonal patterns, functional movements
 - o Exercises
 - Fundamental shoulder exercises
 - Emphasis: neuromuscular control drills, PNF rhythmic stabilization, rotator cuff strengthening and scapular strengthening
 - Continue tubing exercises for ER/IR at 0 degrees ABD (arm at side)
 - Continue isotonics for:
 - Rhomboids
 - Latissimus dorsi
 - Biceps
 - Dumbbell exercises for supraspinatus and deltoid
 - Continue serratus anterior strengthening exercises push-ups floor
 - Continue trunk/LE strengthening exercises
 - Continue neuromuscular exercises
 - Continue self-capsular stretches
- Week 17-20
 - o Continue all exercises above
 - o Emphasis on gradual return to recreational activities

Phase IV (Months 20-28)

- Return to Activity
- Goals:
 - o Progressively increase activities to prepare patient for full functional return
- Criteria to Progress to Phase IV:
 - o Full ROM
 - o No pain or tenderness
 - o Satisfactory clinical exam
- Exercise
 - o Initiate interval sports programs (if patient is a recreational athlete)
 - o Continue tubing exercises listed in Phase III
 - o Continue all strengthening exercises
 - o Continue ROM exercises