

SUPERIOR CAPSULE RECONSTRUCTION REHABILITATION PROTOCOL

TIME PERIOD	RANGE OF MOTION	IMMOBILIZER	EXERCISES
0-6 Weeks	Absolutely NO Shoulder Range of Motion	Worn at ALL TIMES except for hygiene and performing elbow motion	Wrist, elbow, & hand ROM. Postural work, upper trapezius relaxation, active scapular retraction & depression. Encourage walking program & stationary bike.
6 weeks to 4 months	PASSIVE Shoulder Motion ONLY NO Active Motion NO Internal Rotation	May discontinue immobilizer. May use for safety.	Pulleys Table Slides External Rotation to 30 Degrees
4 months	Active ROM Ok to start Internal Rotation	None	Theraband Strengthening Active Overhead Motion
6 months	Full ROM without discomfort	None	May return to all activities

* If biceps tenodesis is done, **NO ACTIVE FLEXION** of biceps until 6 weeks post op. No biceps strengthening until 8 weeks post op.

*****Begin Physical Therapy 1 week after surgery**

Dane Todd, MD

Questions please call: # 402-488-3322

Fax: 402-488-3336

Patient Name: _____

Surgery Date: _____

Side (Circled): Right Left

Superior Capsule Reconstruction

Biceps Tenotomy

Biceps Tenodesis

Subacromial Decompression

Physical therapy to evaluate and treat for post op Superior Capsule Reconstruction according to protocol outlined above. 1-2x per week for 12 weeks.

Notes: _____

MD signature: