

Brandon Beamer M.D - **Orthopedic Sports Medicine Specialist**

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Open Anterior Stabilization Rehabilitation

Patient: _____

Date of Surgery: _____

GOALS

1. Protect anterior capsule and glenoid labrum (healing structures)
2. Minimize postoperative pain and swelling
3. Facilitate full PROM of non-surgical tissue
4. Maintain muscle activity of all non-surgical tissue

Phase 1 (0-6 Weeks Post-op) ***Latarjet, jump to phase 2 at 3 weeks post-op***

Immobilization 6 weeks with Ultrasling (3 weeks for Latarjet)
PROM with pulley for flexion (up to 100 degrees x 2 weeks, 120 2-6 wks)
Start supported Codmans, elbow and wrist ROM
Modalities (i.e. Cryo-cuff), heat (after 2 wks), etc.
Joint mobilization to reduce posterior capsular tightness (posterior glides-
Grade I/II---too aggressive may create unnecessary posterior laxity)
Wrist and gripping exercises
Submaximal (ER) isometrics, progression to scapular and rotator cuff
PRE's as tolerated (no resisted IR)
No active internal rotation to protect subscapularis reattachment
No resisted shoulder elevations (up to 4 weeks, then start)
ER limited to:
30 degrees at 45 degree abduction (week 2)
60 degrees at 45 degree abduction (week 3)
60 degrees at 45 degree abduction (up to week 6)
Begin proprioceptive training and gentle CKC ex- week 4
Stationary bike (@ wk 2)

Phase 2 (6-12 Week Post-op)

6-10 weeks, gradual A/ AA / P/ ROM to improve ER with arm at side.
10-12 weeks, A/ AA/ P/ ROM to improve ER with arm in 45' abduction
AA/ A/ ROM activities to restore flexion, IR, horizontal ADD
Progress to Full ROM
ER to full by 8 weeks
Begin IR isometrics at week 5
Begin IR PRE's at week 6
Deltoid, rotator cuff isometrics progressing to isotonic.
PRE'S of scapular muscles, latissimus, biceps, triceps

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PRE'S work rotators in isolation (use modified neutral)
Joint mobilization (posterior glide)
Utilize exercise arcs that protect anterior capsule from stress during PRE'S
Keep all strength exercises below the horizontal plane in this phase.
Elliptical, UBE-minimal resistance (@ wk 6)
Pool ROM exercises

Phase 3 (12-20 Weeks Post-op)

AROM activities to restore full ROM - all should be full and aggressive pursuing at this time
Restore scapulohumeral rhythm
Joint mobilization
PRE'S for all upper quarter musculature (begin to integrate upper extremity PNF patterns)
Emphasize eccentrics and glenohumeral stabilization.
All PRE'S are below the horizontal plane for non-throwers.
Begin isokinetics, push-up progression (starting w/wall push-ups)
Begin muscle endurance activities (UBE)
Begin jogging (@ wk 12)
Begin swimming (@ 16 wks)

Phase 4 (20-24 Weeks Post-op)

Progress from modified neutral into abduction for PRE'S to cuff.
Aggressive scapular stabilization and eccentric strengthening program.
Begin plyometric training for overhead athletes.
Begin throwing / racquet program
Isokinetic test
Return to sport when strength goals met and throwing program, functional progression and/or work/hardening completed

Phase 5 (>24 wks)

Eliminate strength deficits and maintain flexibility.
Return to full activity
Please see patient 2-3 times per week for 6 to 8 weeks.
Modalities PRN
Please send notes with patient to clinic.