Phase 1: 0-4 weeks

Goals:

1. Patient education
2. Permit healing
3. Control pain and inflammation
4. Initiate range of motion exercise

Treatment:

Immediate Post-op or Post-op day #1:
1. Immobilized in sling
   - use for comfort and public only
2. Pendulums
3. Hand squeezes
4. Elbow AROM
   - supine PROM forward elevation (in appropriate patient)

3-10 Days Post-op:
1. Pendulums
2. Supine PROM forward elevation and external rotation (@ 45° in POS)
3. Heat and ice
4. Active scapular exercises (shoulder shrugs and scapular retraction)

2-4 Weeks Post-op:
1. Continue all stretches
2. PROM internal rotation, cross body adduction, and extension
3. Phase I strengthening (IR, ER, Ext)

Phase II: 4-6 weeks Post-op:

Goals:

1. Improve to full ROM
2. Improve neuromuscular control and strength
Treatment:
1. Continue all stretches
2. Add Phase II stretches if not yet performing (extension, internal rotation, cross body adduction)
3. Progress to Phase II strengthening exercises when at green for all Phase I strengthening (abduction, forward elevation, and ER at 45° in POS with arm supported)
4. Advanced scapular strengthening
5. Manual resistance for rotator cuff, deltoid, and PNF

Bodyblade below 45°

Phase III: 6-12 weeks Post-op:

Goals:
1. Full pain-free ROM
2. Optimize neuromuscular control
3. Improve endurance
4. Initiate return to functional activities

Treatment:
1. Continue all stretches and strengthening - progress rotator cuff exercises into POS abduction
2. Strengthening above 90°
3. Plyometrics*/Bodyblade
4. Work/Sport specific exercises*

Phase IV: 12-16 weeks Post-op:

Goals:
1. Return to work*, sport*, or desired activities
2. Promote concept of prevention

Treatment:
1. Work hardening*
2. Sport specific training*

* Applies to athlete or laborer