



**ORTHOPEDIC
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Shoulder & Elbow Surgery

REHABILITATION PROTOCOL: **POSTERIOR CAPSULOLABRAL RECONSTRUCTION** **(ARTHROSCOPIC)**

Phase I: Protect repair (0 to 6 weeks)

- May remove dressing and shower postop day # 3.
- Sutures are all underneath the skin and will dissolve on their own.
- Ice or cold flow systems encouraged for the first week at a minimum: should be used 3-4 times per day.
- Brace should be in place when not performing exercises.
- May start active scapular mobility exercises at 3 to 4 weeks – Must keep the shoulder musculature relaxed.
- Avoid IR ROM and flexion greater than 90.
- Initiate exercise program 3 times per day:
 1. Immediate elbow, forearm and hand range of motion
 2. Passive and active assistive ER at the side to 60, scapular plane abduction to 90, flexion to 90 only

Phase II: Progress ROM and protect repair (6 to 12 weeks)

- May discontinue brace.
- Lifting restriction of 5 pounds with the involved extremity.
- Initiate gentle rotator cuff strengthening.
- Continue scapular stabilizer strengthening.
- Avoid IR in abducted position > 30 and cross body shoulder motion
- Advance active and passive ROM:
 1. ER at the side and scapular plane elevation to tolerance
 2. Flexion to tolerance – shld should be in externally rotated position
 3. Extension to tolerance
 4. IR from abducted position to 30 degrees

Phase III: Full function (>3 months)

- Begin combined full flexion and IR from abducted position.
- Discontinue lifting restrictions.



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- Advance rotator cuff and scapular stabilizer strengthening.
- Initiate functional progression to sports specific activities at 4 months.