

Arthroscopic Posterior Stabilization Rehabilitation Program

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Diagnosis: Right / Left Posterior Stabilization _____

Date of Surgery: _____

Weeks 0-6 (Phase I):

- >> Sling in neutral rotation for 5 weeks (padded abduction sling) >> Codman exercises, elbow and wrist ROM
- >> Wrist and grip strengthening, isometric abduction
- >> Isometric deltoid (anterior, middle, posterior) start week 2-4.
- >> Scapular stabilization (rhomboid, trapezius, serratus anterior) start week 2-4.

Range of Motion Goals

	Wk 0-2	Wk 3-4	Wk 5-6
Passive elevation scapula plane	90°	120°	145°
Passive external rotation	0°	20°	45°
Internal rotation	----	----	----
Cross chest adduction	----	----	----

Weeks 6- (Phase II):

- >> Increase FF and internal/external rotation slowly as tolerated: PROM → AAROM → AROM
- >> Advance isometrics with arm at side – FF/ER/IR/ABD/ADD
- >> It should be strongly encouraged that the patient's main focus in this phase of rehabilitation is to restore range of motion and that strengthening is secondary.
- >> Heat before treatment, ice after treatment per therapist's discretion
- >> Once 140° active FF, advance strengthening as tolerated: isometrics → bands → light weights (1- 5 lbs); 8-12 reps/2-3 sets per rotator cuff, deltoid, and scapular stabilizers with low abduction angles
- >> Only do strengthening 3x/week to avoid rotator cuff tendonitis
- >> Closed chain exercises

Weeks 12-48 (Phase IV):

- >> Full AROM as tolerated
- >> Begin eccentrically resisted motions, plyometrics (ex. Weighted ball toss), proprioception (es. body blade)
- >> Begin sports related rehab at 3 months, including advanced conditioning
- >> Return to throwing at 4 1/2 months
- >> Push-ups at 4 1/2 - 6 months
- >> Throw from pitcher's mound at 6 months
- >> MMI is usually at 12 months post-op