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### **Protocol for Patients undergoing Subacromial Decompression or Distal Clavicle or SLAP repair or Biceps Tenodesis Procedure**

Days 1-10

The goal of days 1-10 is protect the shoulder, to prevent adhesions, increase circulation, and decrease pain and inflammation.

- Shoulder immobilizer to be worn for 7-10 days unless indicated by M.D.
- Pendulum exercises only for the shoulder; body is to remain stationary, patient to move arm in circular motion the circumference of a basketball in both a clockwise then counterclockwise motion; should do these this exercise 3 x a day for 5-10 minutes at a time on a daily basis.

- Patient to do active elbow, wrist and hand range of motion working on flexion and extension, pronation and supination
- Edema control for hand, wrist, elbow
- Hand strengthening by squeezing foam ball
- Ice to shoulder following pendulums as needed
- NO active or passive forward elevation, abduction, internal or external rotation of operative shoulder

#### Day 10-Week 6

The goal of this time period is to gradually restore passive, active assisted and then active range of motion to the operative shoulder. The shoulder is still in the process of healing and aggressive range of motion SHOULD NOT be performed. The patient should attend physical therapy 3 x a week, and do their own exercises on the off days. The patient's shoulder sling is discontinued at the first post-op visit around day 10.

- Supine passive forward elevation and external rotation can be initiated; initially in weeks 2 and 3 the goal should be forward elevation in the scapular plane to 170-180 degrees, and external rotation with arm at the side to 30 degrees
- Weeks 4-6 should involve progression to active assisted then active ROM of the operative shoulder.
- Pulley exercises can begin as well
- Patient is permitted to do work in the pool with shoulder submerged
- Heat to shoulder prior to treatment, ice to shoulder following treatment
- NO strength training to be performed during this period

#### Weeks 6-8

The goals of weeks 6-8 are to begin gentle strengthening of the rotator cuff and scapular stabilizers. Patient should attend therapy 2-3 times per week.

- Patient can begin internal rotation stretching using towel behind back to stretch operative arm
- Can begin light rotator cuff and scapular stabilizer exercises; this is to be very low resistance high repetition exercise with theraband only; patient is NOT TO DO any weight training or heavy strengthening until 3 months post-op
- Can begin light isokinetics and plyometrics as tolerating
- Heat to shoulder prior to treatment
- Ice to shoulder following exercise

#### Weeks 9-12

- Patients can be discharged with a home set of light rotator cuff and scapular stabilizer exercises
- After week 12 they can return to full sport participation and weight training