

Limit passive FF to the scapular plane
Limit passive IR to the scapular plane
Aerobic conditioning⁷
Scapular retraction⁸

Progression Toward Functional ROM Phase 2 (Approximately Weeks 6-10)

Milestone to advance to next phase: Passive FF to 150°
Passive ER to 60°
Active supine FF to 90°, ER to 45°⁹
Optimal humeral head control
Minimal to no pain with light ADLs

Suggested Interventions:

Passive & Active assisted ROM¹⁰
Recommended precautions:
FF in scapular plane (wall slides⁸ wand exercises, pulleys)¹¹
ER (gentle beyond 30° to respect subscapularis healing)
FF AROM in supine
Manually resisted scapular side-lying stabilization exercises¹²
Initiate PNF patterning supported such as wall slides¹³
Isometrics:
Deltoid in neutral
ER (modified neutral) ROM < 30°
IR (modified neutral)
Aerobic conditioning including UBE⁷

Optimizing Functional Range of Motion/Early Strengthening Phase 3 (Approximately Weeks 10-16)

Milestone to advance to next phase: Axioscapular muscle strength grades 4/5 MMT
Optimal scapulohumeral rhythm to 90° elevation
Minimal pain and inflammation with application of the soreness rules¹⁴ for intensity of exercise

Suggested Interventions

Progress ROM as tolerated¹¹
Uniplanar flexibility exercises into extension and internal rotation
PNF patterning
Recommended precaution: in supine or supported until week 12¹⁵
Isotonic strengthening:
Emphasis on axioscapular muscles (scapular rows¹⁶)
Continued attention to humeral head control and scapulohumeral rhythm with as load progresses

Return to Full Function Phase 4 (Approximately Weeks 16 to Discharge)

Milestone to discharge: Optimal ROM
Full Independent ADLs
Optimal scapulohumeral rhythm to > 120° elevation
Home program with dosing per application of the soreness rules¹⁴ for intensity of exercise

Suggested Interventions

Flexibility exercises: towel stretch (IR), posterior capsule stretch

Progressive resistive strengthening:

Dumbbells

Progressive resistive equipment

Elastic band IR/ER

For additional questions, comments, or concerns regarding the implementation of these physical therapy guidelines, please contact

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Please respond to our anonymous survey regarding these guidelines to assist in improving patient care



and advocacy. https://slu.az1.qualtrics.com/jfe/form/SV_bpX7Z9AaVTzGblj

Appendices of referenced assessments

Soreness Rules Adapted from Fees et al. 1998 ¹⁴	
Criterion	Action
1. Soreness during warm-up that continues	2 days off, drop down 1 step
2. Soreness during warm-up that goes away	Stay at step that led to soreness
3. Soreness during warm-up that goes away from redevelops during session	2 days off, drop down 1 step
4. Soreness the day after lifting (not muscle soreness)	1 day off, do not advance program to the next step
5. No soreness	Advance 1 step per week or as instructed by healthcare professional

References:

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