



### Latarjet or Anterior Free Bone Block Rehabilitation

The following is a basic framework from which to work during rehabilitation following a Latarjet or free bone block procedure for anterior instability. Every patient is different, so the time points are just guidelines – the emphasis should be on achieving the milestones of each phase prior to advancing to the next phase. Please feel free to communicate with our office with any questions or concerns.

	Range of Motion	Immobilizer	Exercises
<b>Phase I</b> <b>0 – 4 weeks</b>  <b>Maximal Protection</b>	Limit ER to passive 30° to protect subscapularis repair  Limit FF to passive 90°  Elbow A/AAROM as tolerated	Worn at all times (day and night) except for showering and exercise	Wrist and gripping exercises  Begin deltoid/cuff isometrics  <b>**Do not perform pendulums</b>
<b>Phase II</b> <b>4 – 6 weeks</b>  <b>Moderate Protection</b>	A/AAROM FF limit to 140°  A/AAROM ER to 45°  Progressive from AAROM to AROM: quality movement only, avoid forcing active motion with substitution patterns, begin with gravity-eliminated motions (supine) first	Discontinue sling at 4 – 6 weeks	Deltoid/cuff isometrics  Continue with wrist/gripping exercises
<b>Phase III</b> <b>6 – 12 weeks</b>  <b>Minimum Protection</b>  <b>Mild Strengthening</b>	Progress to full motion without discomfort  <b>10 – 12 weeks: AIAA/PROM to improve ER with arm at 45°</b>	None	Deltoid/cuff isometrics, progress to isotonics  PREs for scapular muscles, latissimus, biceps, triceps  PREs for rotator cuff in isolation (use modified neutral)  Emphasize posterior cuff, latissimus, scapular muscle strengthening, stressing eccentrics



			<p>Utilize exercise arcs that protect anterior and posterior capsule from stress during PREs</p> <p>Keep all strengthening exercises below horizontal plane</p>
<p><b>Phase III</b> <b>12 – 16 weeks</b></p> <p><b>Criteria:</b> <b>1. Pain-free AROM</b> <b>2. Pain-free manual muscle test</b></p>	<p>AROM activities to restore full ROM, no limits</p>	<p>None</p>	<p>Restore scapulothoracic rhythm</p> <p>Joint mobilization</p> <p>Aggressive scapular stabilization and eccentric strengthening</p> <p>Initiate isotonic shoulder strengthening: side-lying ER, prone arm raises at 0°, 90°, 120°, elevation in scapular plane with IR/ER, lat pulldown closed grip, prone ER</p> <p>Dynamic stabilization WB and NWB</p> <p>PREs for all upper quarter musculature, continue to emphasize eccentrics and glenohumeral stabilization</p> <p>All PREs below horizontal plane for non-throwers</p> <p>Begin isokinetics</p> <p>Begin muscle endurance activities (UBE): high seat and low resistance, must be able to do active shoulder flexion to 90° without substitution</p> <p>Advanced functional and agility exercises</p> <p>Isokinetic test</p> <p>Functional test assessment</p> <p>Full return to sporting activities</p>