



Shoulder Posterior Stabilization Rehabilitation

The following is a basic framework from which to work during rehabilitation following shoulder posterior stabilization. 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	Sling	Exercises
Phase I 0 – 6 weeks	0 – 3 weeks: None 3 – 6 weeks: Begin PROM, limit to 90° flexion, 45° IR, 90° abduction	0 – 3 weeks: at all times except for exercises and hygiene 3 – 6 weeks: worn during daytime only	0 – 3 weeks: elbow/wrist/hand ROM, grip strength at home only 3 – 6 weeks: begin PROM activities – Codman’s, avoid stretching posterior capsule, closed chain scapular exercises
Phase II 6 – 12 weeks	Begin AAROM/AROM, PROM to tolerance Goals: full ER, 135° flexion, 120° abduction	None	Continue Phase I work, begin active-assisted exercises, deltoid/RC isometrics at 8 weeks Begin resistive exercises for scapular stabilizers, biceps, triceps, and RC*
Phase III 12 – 16 weeks	Gradual return to full AROM	None	Advance activities in Phase II – emphasize ER and latissimus eccentrics, glenohumeral stabilization Begin muscle endurance activities (i.e. upper body ergometer) Cycling/running as tolerated
Phase IV 4 – 5 months**	Full and pain-free	None	Aggressive scapular stabilization and eccentric strengthening Begin plyometric and throwing/racquet program, continue with endurance activities Maintain ROM and flexibility
Phase V 5 – 7 months	Full and pain-free	None	Progress Phase IV activities, return to full activity as tolerated



***Utilize exercise arcs that protect the posterior capsule from stress during resistive exercises, and keep all strengthening exercises below the horizontal plane in Phase II.**

****Limited return to sports activities.**