

Superior Capsular Reconstruction Post-Surgical Rehabilitation Protocol

This rehabilitation protocol has been developed for the patient following superior capsular reconstruction procedure. Please note this protocol is a guideline. Patients with additional surgery (i.e., subacromial decompression, distal clavicle resection, biceps repair, partial rotator cuff repairs) will progress at different rates. Achieving the criteria of each phase should be emphasized more than the approximate duration. If a patient should develop an increase in pain or swelling or decrease in motion at any time, activity should be decreased until problems are resolved.

POST-OP DAYS 1-14

- Shoulder immobilizer with abduction pillow at all times, even while sleeping
- Pillow under shoulder/arm while sleeping for comfort
- Hand exercises
- Elbow and wrist active motion with shoulder in neutral position
- Ice pack

GOALS

- Pain control
- Protection of graft/surgical sites
- Maintenance of wrist/elbow range of motion, grip strength

WEEKS 2-3

- Begin PROM
- Pendulums
- Table Slides
- Shoulder shrugs/scapular retractions without resistance

GOALS

- PROM
- Flexion to 90°
- Extension to 20°
- Abduction to 45°
- ER to 45°

WEEKS 3-6

- Discontinue sling at 6 weeks
 - Continue appropriate previous exercises
 - Begin isometrics of the shoulder at 6 weeks
- Continue pendulum exercises

GOALS

- PROM
- Flexion to 130°
- Abduction to 90°

WEEKS 6-9

- Continue appropriate previous exercises
- Begin AAROM/AROM around 6 weeks
- AAROM-Flexion and Abduction > 90° (pulleys, supine wand)
- ER as tolerated (wand doorway stretch)
- Standing rows with theraband
- Theraband IR/ER
- Prone scapular retraction exercises without weights
- Biceps and triceps exercises without weight

WEEKS 6-9 CONT

- Stairmaster
- Treadmill-walking progression program
- Pool walking/running

GOALS

- AAROM flexion and abduction to 150°
- PROM
- Flexion to 160°-170°
- External rotation to 60°
- Abduction to 90°

WEEKS 9-12

- Begin strengthening rotator cuff in neutral around 8-9 weeks
- Without resistance
- Side lying ER
- Continue appropriate exercises
- Seated row with light weight
- Body Blade at side
- Ball on wall (arcs, alphabet)
- Ball Toss with arm at side using light ball
- Elliptical

GOALS

- AAROM, AROM through functional range without pain

WEEKS 12-16

- Light or un-resisted rotator cuff exercises
- Push up on wall

GOALS

- Maintain AAROM/AROM
- Protect graft during re-vascularization (decreased strengthening exercises)

MONTHS 4-6

- Begin increasing resistance on TheraBand exercises as tolerated
- Push up progression (table to chair)
- Light plyometric exercises
- Body blade with abduction

GOALS

- Functional AROM
- Normal rotator cuff strength

MONTHS 6-8

- Weight training with light resistance
- Regular push ups
- Sit ups
- Running progression to track
- Transition to home/gym program

GOALS

- Return to all activities
- Range of motion
- Elevation: 115° – 180°
- External Rotation: 23° – 57°
- Internal Rotation to L1
- Strength
- Abduction: 5- or greater
- External Rotation: 5- or greater
- Internal Rotation: 5- or greater