

ANTERIOR CAPSULAR SHIFT REHABILITATION PROTOCOL (Regular Program)

I. Phase I - Protection Phase (Week 0-8)

Goals: Allow healing of sutured capsule
Begin early protected and restricted range of motion
Retard muscular atrophy and enhance dynamic stability
Decrease pain/inflammation

Brace: Patients with bidirectional instability are placed in sling for 4-6 weeks
Patients with multi-directional instability are placed in abduction brace for 4-6 weeks.
** Physician will make determination.

A. Week 0-2

Precautions:

1. Sleep in immobilizer for 4 weeks
2. No overhead activities for 6-8 weeks
3. Compliance to rehab program is critical.

Exercises:

Wrist, hand, gripping
Elbow flex/extension and pronation/supination
Pendulum exercises (non-weighted)
AROM cervical spine
Isometrics
- Flexors, Extensors, ER, IR, ABD
- Rhythmic stabilization drills ER/IR
- Proprioception drills

B. Week 3-4

Goals: Gradual increase in ROM
Normalize arthrokinematics
Improve strength
Decrease pain/inflammation

1. Initiate Range of Motion Exercises
L-Bar active assisted exercises, gentle PROM exercises
ER at 30 degrees scapular plane to 10-15 degrees.

IR at 30 degrees scapular plane to 15-20 degrees.
Shoulder flexion to 70 degrees week 3.
Shoulder flexion to 90 degrees week 8.
Rope & Pulley Flexion to 70-90 degrees.

- * All exercises performed to tolerance and therapist/physician motion guidelines
- * Take to point of pain and/or resistance and hold

2. Strengthening exercises
 - isometrics
 - rhythmic stabilization exercises
 - may initiate tubing for ER/IR at 0 degrees
 - proprioception drills
 - scapular strengthening exercises
3. Conditioning program for:
 - trunk
 - lower extremities
 - cardiovascular
4. Decrease pain/inflammation:
 - ice, NSAID, modalities

C. Week 5-8

1. Continue all exercises listed above
2. Range of Motion Exercises
L-Bar Active Assisted Exercises
 - *Base rate of ROM progress on amount of motion and end feel
 - ER at 40 degrees abduction scapular plane to 40 degrees at week 5
 - IR at 40 degrees abd scapular plan to 45 degrees
 - Flexion to 125 degrees week 5-6
3. Strengthening exercises
 - initiate active ROM week 5
 - rhythmic stabilization drills
 - emphasize rotator cuff strengthening

II. Phase II - Intermediate Phase (Week 8-14)

Goals: Full non-painful ROM at week 10-12
 Normalize arthrokinematics
 Increase strength
 Improve neuromuscular control

A. Week 8-10

1. Range of Motion Exercise
L-Bar active assisted exercises at 90 degrees ABD
Flexion to 145-150 degrees

ER at 90 degrees Abd to 70 degrees
 IR at 90 degrees Abd to 55 degrees
 *Goal: to obtain 80% (at week 10) of full ROM and allow time and patient to gain the rest

2. Strengthening Exercises

- Initiate isotonic dumbbell program
 - sidelying ER
 - sidelying IR
 - shoulder Abduction to 90 degrees
 - supraspinatus (full can)
 - latissimus dorsi prone rowing
 - rhomboids horz. Abd
 - biceps curls
 - triceps curls
 - push-ups into chair (serratus anterior)

Continue tubing at 0 degrees for ER/IR
 Continue stabilization exercises for the glenohumeral joint
 Scapular strengthening and neuromuscular exercises

3. Initiate Neuromuscular Control Exercises for Scapulothoracic Joint

B. Week 11-14

1. Continue all exercises listed above, emphasis neuromuscular control drills, PNF stabilization drills, and scapular strengthening.
2. Progress ROM to:
 - ER at 90 degrees ABD: 80 - 85 degrees
 - IR at 90 degrees ABD: 70 - 75 degrees
 - Flexion to 165 - 170 degrees.

III. Phase III - Dynamic Strengthening Phase (Week 14-22)

****Aggressive strengthening or stretching program based on type of patient. (Therapist and/or physician will determine.**

A. Week 14-17

Goals: Improve strength/power/endurance
 Improve neuromuscular control
 Prepare athletic patient for gradual return to sports

**** Criteria to Enter Phase III:**

1. Full non-painful ROM
**** Patient must fulfill this criteria before progressing to this phase.**
2. No pain or tenderness
3. Strength 70% or better compared to contralateral side

Exercises:

- Fundamental shoulder exercises
 - **Emphasis: Neuromuscular control drills, PNF rhythmic stabilization, rotator cuff strengthening, scapular strengthening.**
- Continue tubing exercises for IR/ER at 0 degrees ABD (arm at side)
- Continue isotonics:
 - for rhomboids and lower trapezius

- for latissimus dorsi
 - for biceps
 - for diagonal patterns D2 extension with RS
 - for diagonal patterns D2 flexion with RS
 - Continue dumbbell exercises for supraspinatus and deltoid
 - Continue serratus anterior strengthening exercises push-ups floor
- Continue closed kinetic chain drills

Continue trunk/LE strengthening exercises
Continue neuromuscular exercises and proprioception drills

B. Week 18-22

- Continue all exercises above
- Emphasis on gradual return to restricted recreational activities (no overhead sports)

IV. Phase IV - Return to Activity (Week 22-30)

Goals: Progressively increase activities to prepare patient for full functional return

Criteria to Progress to Phase IV:

1. Full ROM
2. No pain or tenderness
3. Muscle strength test that fulfills criteria
4. Satisfactory clinical exam

Exercise:

- Initiate interval sports programs (if patient is a recreational athlete) (usually at 6-7 months)
- Continue strengthening exercises
- Fundamental shoulder strengthening exercises
- Core stabilization drills
- Endurance training