



Dr. O'Meara's

Anterior Shoulder Reconstruction
Rehabilitation Protocol
www.PalomarOrtho.com

Anterior Shoulder Reconstruction

Rehabilitation Protocol

Zero to Two Weeks Post-op

Sling

Pendulum Exercises

Forward Wall Walks

Active & Passive Full Forward Elevation

No External Rotation beyond Neutral

Two to Six Weeks Post-op

Discontinue Sling

Pendulum Exercises

Forward Wall Walks

Active & Passive ROM

No External Rotation beyond Neutral

No Internal Rotation against Resistance

> Six Weeks Post-op

Active Motion of the Shoulder

ROM Stretching

RTC Strengthening

3 Months Post-op

Return to Sports

Zero to Two Weeks Post-op

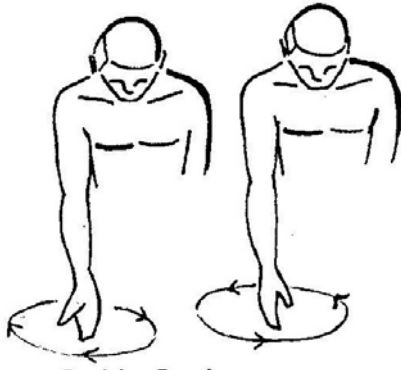
Sling

Pendulum Exercises

Forward Wall Walks

Active & Passive Full Forward Elevation

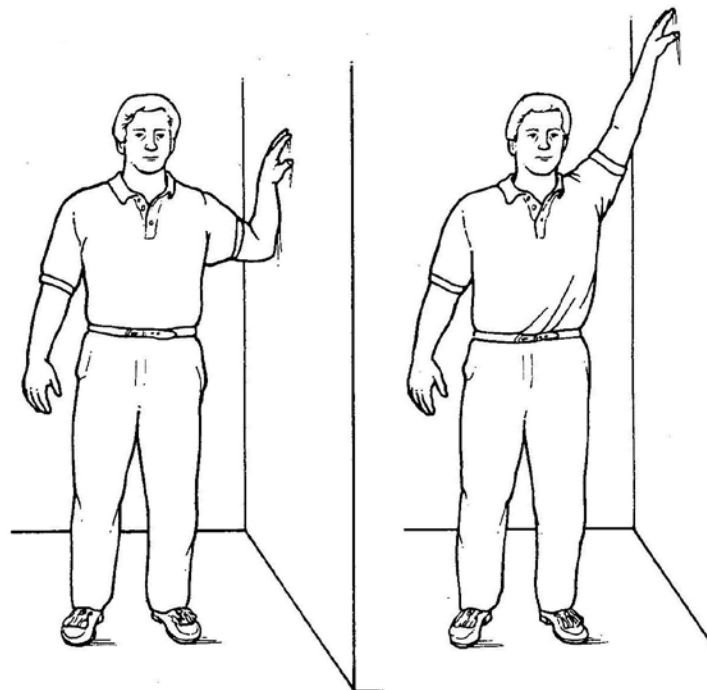
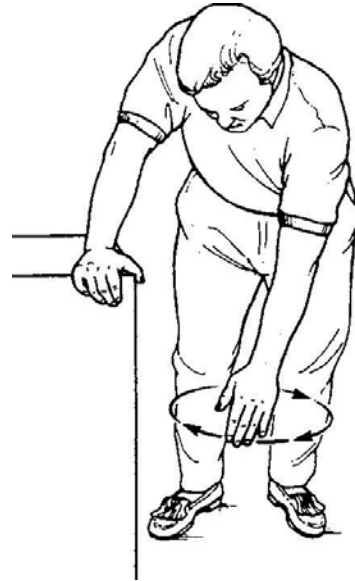
No External Rotation beyond Neutral



Pendulum Exercises

Standing —

- (A) Bending over at waist, circle entire arm clockwise, palm facing forward.
- (B) Bending over at waist, circle entire arm counter-clockwise, palm facing backward.



Two to Six Weeks Post-op

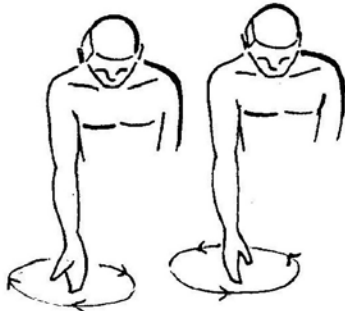
Discontinue Sling

Pendulum Exercises

Forward Wall Walks

Active & Passive ROM

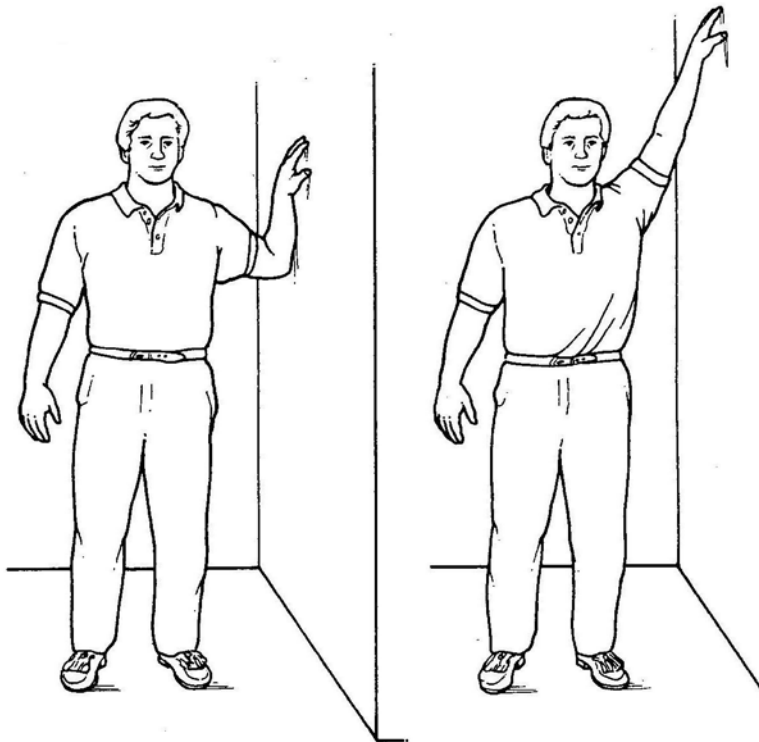
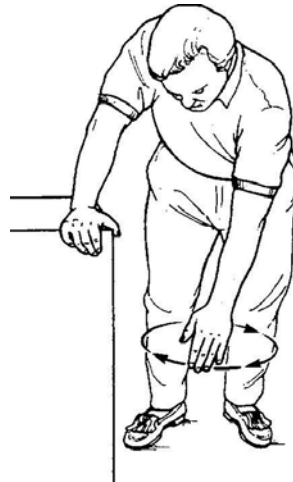
No External Rotation beyond Neutral
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Pendulum Exercises

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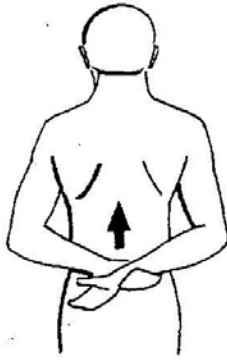


> Six Weeks Post-op

Active Motion of the Shoulder

ROM Stretching

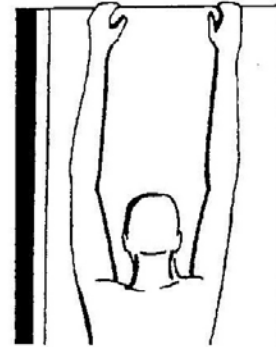
RTC Strengthening



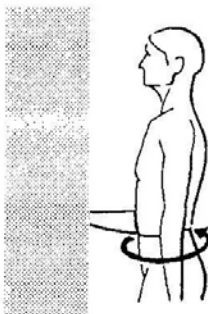
Assisted Internal Rotation
Standing — Grasp wrist of the operating arm with the good hand behind back, slide hands up and down.



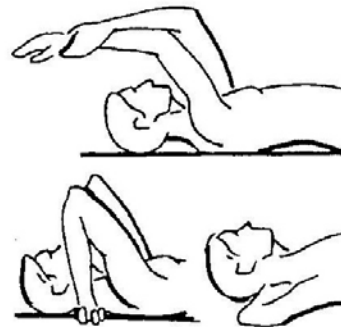
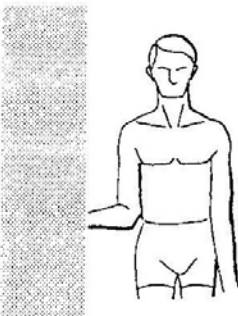
Internal Rotation
Standing — Behind low back, pull hand up as high as possible using a towel.



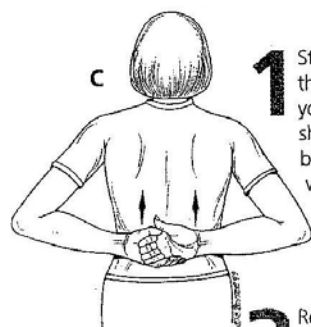
Forward Elevation
Facing an open door, assist arm up, hook fingertips on top of door. Bend knees slightly to stretch. Use a stool if necessary.



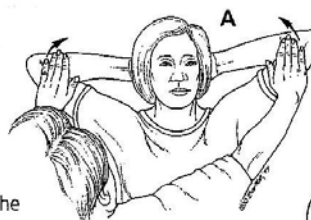
External Rotation
Standing in a doorway with elbow flexed to 90° and held close to body, place palm on door jamb, slowly turn body away from arm.



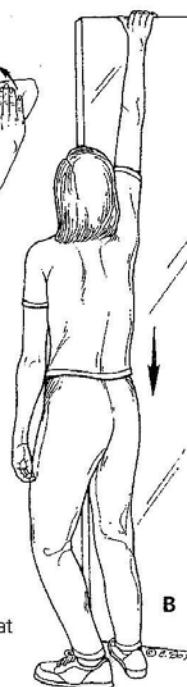
Assisted External Rotation
Lying on back — Grasp wrist of operated arm with good hand, reach up and overhead, clasp hands, then slide hands down behind neck while spreading elbows. Reverse by sliding clasped hands upward, out from under neck.



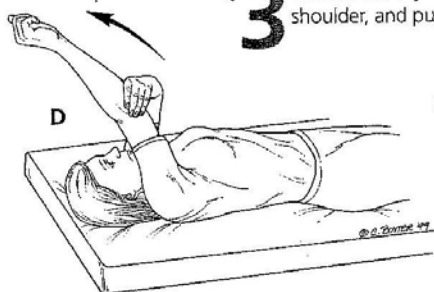
1 Stand with your shoulder blades against the wall and hands clasped behind your head. move the shoulder joint by pinching your shoulder blades together until your elbows touch the wall (A).



2 Reach up and grasp an overhead support or door. Then flex at the knee, using your body weight to pull on your stiff shoulder (B).



3 Reach behind your back, grasp your hand on the side of the stiff shoulder, and pull upward toward the opposite shoulder blade (C).

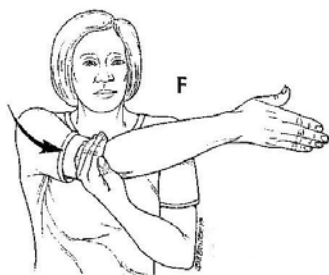


4 Stretch your arm upward in an overhead reach (D). You can assist with the opposite arm if this makes it easier.

5 Move the hand and forearm on the affected side away from your body. Perform this movement against the resistance offered by an elastic band that is held against your chest in the opposite hand, as shown in the illustration (E).



6 Stretch the affected shoulder in a cross-body reach by moving the wrist toward the point of the opposite shoulder. If you need assistance, press on the upper arm with your opposite hand, as shown here (F).



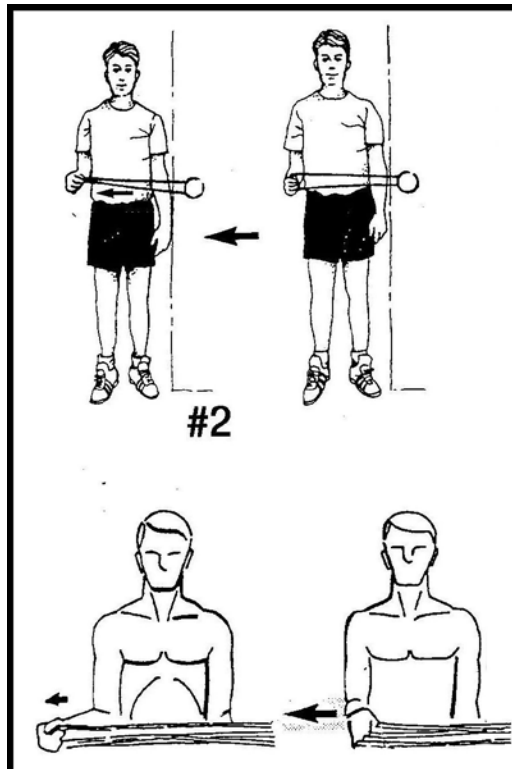
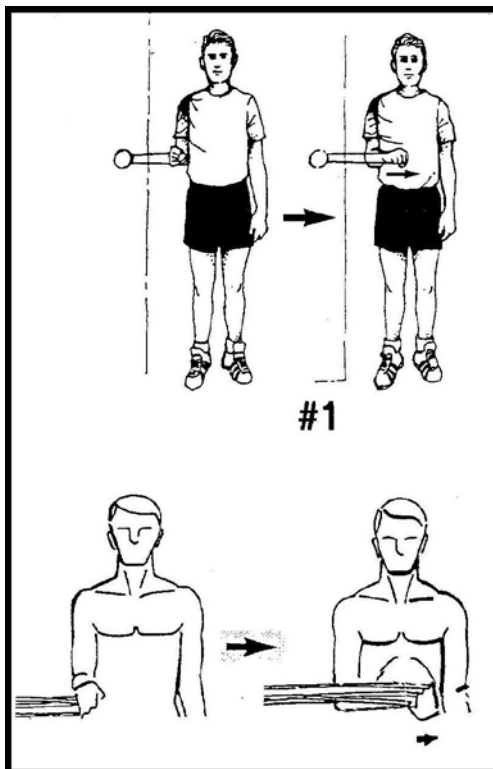
Continue the stretching exercises as needed to regain or maintain a full range of motion in the shoulder. Also begin to perform Rotator Cuff Strengthening Exercises.

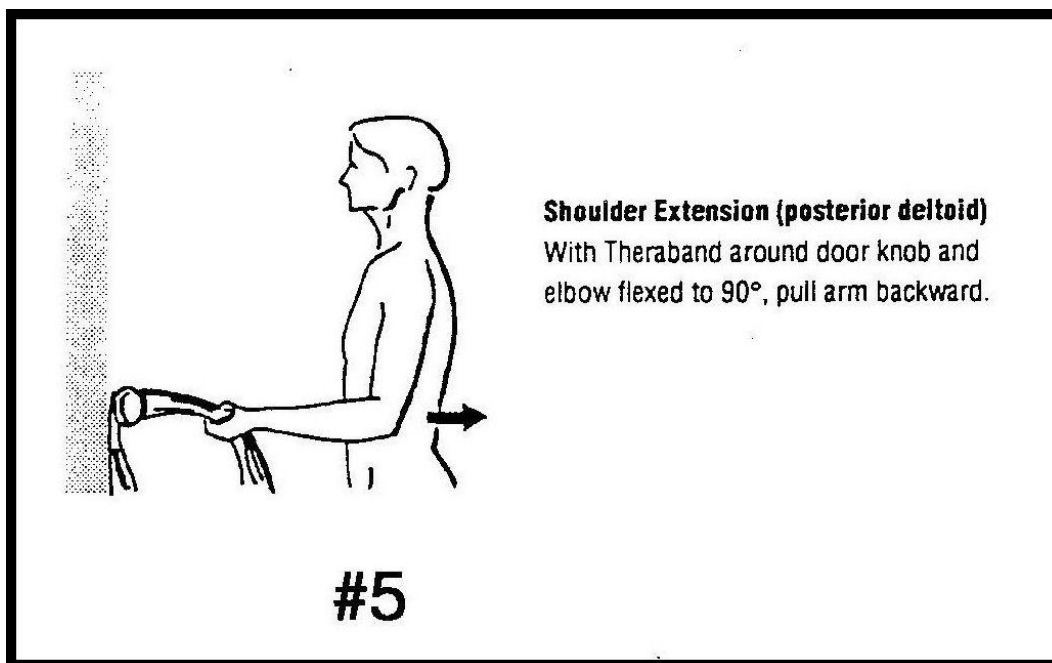
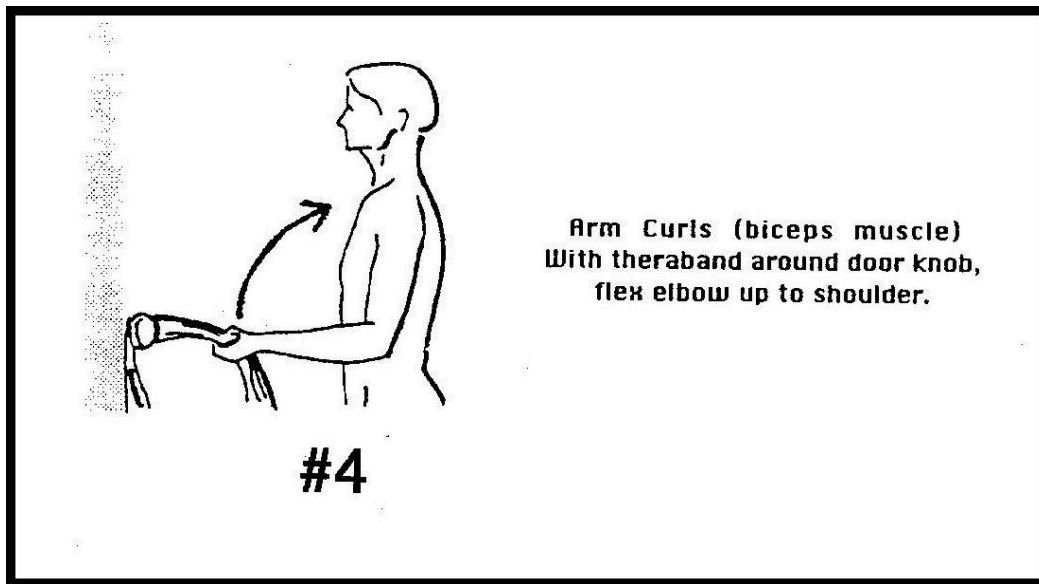
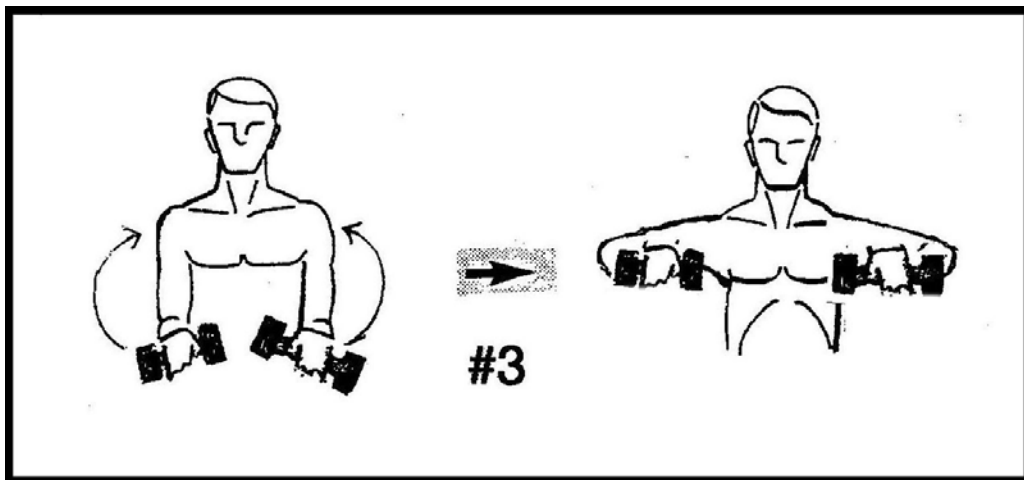
This strengthening program includes **only five exercises** that isolate on and strengthen the five critical muscle functions of the shoulder: Internal Rotation, External Rotation, Abduction, Extension and Curls.

The strength training should involve gentle smooth repetitions. No jerking or yanking! Perform 3 sets of 15 – 20 repetitions of each of the 5 exercises, every other day. In the third set of each exercise, try to “exercise to fatigue”.

The most effective strength training and rehabilitation programs include at least one set of the maximum number of repetitions possible for each exercise performed (“exercise to fatigue”). Higher numbers of repetitions (15 – 20) favor increased muscle endurance while building muscle strength as well, so use a lighter weight or theraband that will allow at least 15 repetitions in a normal set.

Three sets of 15 – 20 reps performed every other day is an optimum strengthening and rehabilitation program. However, during the first month of strengthening, a single set program, every other day, is adequately effective at improving muscle strength and endurance.





3 Months Post-op

Return to Sports

