



Subscapularis Repair

<u>Postop</u>	<u>Goals</u>	<u>Range of Motion</u>	<u>Shoulder Immobilizer</u>	<u>Exercises</u>
Phase I Weeks 0-6 PT 1-2x/ week HEP daily	Protect surgical repair NO active IR No ER past 45°	0-3 weeks: None 3-6 weeks: Begin PROM Limit: - 90° flexion - 45° ER - 20° extension	Sling at all times including sleep Remove for hygiene & exercises	0-2 weeks: elbow/wrist/hand ROM; grip strengthening 2-4 weeks: Begin PROM activities Limit to 45° ER Codman's; posterior capsule mobilizations; avoid stretch of anterior capsule and extension; No active IR
Phase II Weeks 6-12 PT 2-3x/ week HEP daily	Protect surgical repair No resisted IR Goal: - Full ER - 135° flexion - 120° abduction	Begin A/AAROM PROM to tolerance Goal: - Full ER - 135° flexion - 120° abduction	None	Continue Phase I exercises Begin active assisted exercises Deltoid & Rotator Cuff isometrics at 8 weeks Begin resistive exercises for scapular stabilizers, biceps, triceps, and rotator cuff * No resisted IR
Phase III Weeks 12-16 PT 2-3x/ week HEP daily	Protect surgical repair	Gradual return to full AROM	None	Advance Phase II exercises Emphasize ER and latissimus eccentrics, glenohumeral stabilization Begin muscle endurance activities (upper body ergometer) Cycling/ running ok ay at 12 weeks
Phase IV 4-5 Months ** PT 1-2x/ week HEP daily		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 exercises Return to full activity as tolerated

* Utilize exercise arcs that protect the anterior capsule from stress during resistive exercises. Keep all strengthening exercises below the horizontal plane in Phase II

** Limited return to sports activities