

# Shoulder Instability - Anterior Labrum Repair Protocol

	<b>Phase I: weeks 1-3 Rest and Healing Phase</b>	<b>Phase II: weeks 4-6 Protective, Early Motion, and Early Strength Phase</b>
Weight-Bearing and Immobilization	<ul style="list-style-type: none"> <li>• Sling immobilizer with pillow <u>at all times</u> except for PT/HEP exercises or for hygiene</li> <li>• Non-weight-bearing</li> </ul>	
Aerobic	<ul style="list-style-type: none"> <li>• None</li> </ul>	<ul style="list-style-type: none"> <li>• None</li> </ul>
Range of Motion (ROM) and Strengthening	<ul style="list-style-type: none"> <li>• ROM <ul style="list-style-type: none"> <li>▸ Passive FF in scapular plane to 90°</li> <li>▸ Passive ER and extension to neutral</li> <li>▸ IR to stomach</li> <li>▸ No cross-body adduction until 6 weeks</li> <li>▸ Full hand, wrist, and elbow AROM</li> </ul> </li> <li>• Pain free submaximal deltoid isometrics</li> <li>• Scapular pinches/squeezes</li> </ul>	<ul style="list-style-type: none"> <li>• Continue Phase I exercises as necessary</li> <li>• ROM <ul style="list-style-type: none"> <li>▸ AAROM ER to 45° (wand exercises)</li> <li>▸ AAROM FF in scapular plane to 120° (wand exercises)</li> </ul> </li> <li>• Begin scapular stabilizing and side-lying exercises</li> <li>• ER and IR isometrics in modified neutral (must be submaximal and pain-free)</li> </ul>
Other	<ul style="list-style-type: none"> <li>• Heat before and/or ice after PT sessions as needed</li> <li>• Modalities as needed to reduce swelling and for muscle re-education</li> <li>• Home Exercise Program (HEP) per discretion of Physical Therapist</li> </ul>	
Goals	<ul style="list-style-type: none"> <li>• Pain and inflammation control</li> <li>• Protection of tissue healing</li> <li>• Minimize joint stiffness</li> </ul>	<ul style="list-style-type: none"> <li>• Continue protection of tissue healing</li> <li>• Minimize pain and inflammation</li> <li>• Progress ROM</li> <li>• Continue light strengthening</li> <li>• ER to 45°</li> <li>• FF to 120°</li> <li>• 4/5 ER and IR strength</li> </ul>

	<b>Phase III: weeks 7-12 Late Motion and Continued Strengthening Phase</b>	<b>Phase IV: months 3-12 Late Strengthening and Return-to- Sport Phase</b>
Weight-Bearing and Immobilization	<ul style="list-style-type: none"> <li>• Sling immobilizer with pillow <u>at all times</u> except for PT/HEP exercises or for hygiene</li> <li>• Discontinue sling immobilizer at week 8</li> </ul>	<ul style="list-style-type: none"> <li>• None</li> </ul>
Aerobic	<ul style="list-style-type: none"> <li>• May begin stationary bike</li> <li>• May begin elliptical machine at week 8</li> </ul>	<ul style="list-style-type: none"> <li>• Begin walk-jog-run progression and progress to advanced conditioning as tolerated</li> </ul>
Range of Motion (ROM) and Strengthening	<ul style="list-style-type: none"> <li>• Continue Phase II exercises as necessary</li> <li>• ROM <ul style="list-style-type: none"> <li>▸ AAROM FF in scapular plane to tolerance</li> <li>▸ AAROM ER to tolerance</li> <li>▸ Begin AAROM for IR</li> </ul> </li> <li>• Strengthening <ul style="list-style-type: none"> <li>▸ Progress scapular strengthening including closed chain exercises</li> <li>▸ Begin light bands and isotonic ER/IR strengthening in modified neutral position (pain-free)</li> <li>▸ Begin latissimus strengthening (progress as tolerated)</li> <li>▸ Humeral head stabilization exercises</li> </ul> </li> </ul>	<ul style="list-style-type: none"> <li>• Continue Phase III exercises as necessary</li> <li>• Progress to full functional ROM</li> <li>• Strengthening <ul style="list-style-type: none"> <li>▸ Advance ER and IR strengthening to 90/90 position</li> <li>▸ Continue general upper extremity strengthening program</li> <li>▸ Begin additional closed-chain exercises</li> </ul> </li> <li>• Begin activity-specific plyometrics (eg. weighted ball toss)</li> <li>• Begin proprioception (eg. Bodyblade)</li> <li>• Begin sport-specific or activity-specific program (pain-free)</li> </ul>
Other	<ul style="list-style-type: none"> <li>• Heat before and/or ice after PT sessions as needed</li> <li>• Modalities as needed to reduce swelling and for muscle re-education</li> <li>• Home Exercise Program (HEP) per discretion of Physical Therapist</li> </ul>	
Goals	<ul style="list-style-type: none"> <li>• Minimize pain and inflammation</li> <li>• Full ROM</li> <li>• 5/5 ER and IR strength</li> <li>• Normal scapulohumeral rhythm/dynamics</li> </ul>	<ul style="list-style-type: none"> <li>• Begin and progress with pain-free sport-specific or activity-specific program</li> <li>• ER and IR strength equal to unaffected side</li> <li>• Independent HEP</li> </ul>

### Other Sport-Specific Restrictions

- May return to throwing 4.5 months (18 weeks) after surgery
- May return to pitching from a mound 6 months (24 weeks) after surgery
- May return to contact sports 6-9 months after surgery