Posterior Labral Repair Physical Therapy Protocol

Phase I: Protection (Weeks 0 to 6)

Goals
- Allow healing of sutured capsule
- Initiate early protection range of motion
- Retard muscular atrophy
- Decrease pain and inflammation

Brace
- Discontinue use after four weeks (unless otherwise advised by Dr. Kendall)
- Sleep in immobilizer for four weeks

Weeks 0 to 4

Range of Motion
- Week 1
  - Flexion: 90 degrees
  - External rotation: 25 to 30 degrees
  - Internal rotation: 0 degrees
- Week 3
  - Internal rotation: 15 degrees
- Week 4
  - Flexion to tolerance
  - External rotation: 45 to 60 degrees
  - Internal rotation: 35 degrees
  - Abduction: 90 degrees

Exercises
- Elbow/wrist/hand exercises
- Passive and gentle active assistive range of motion exercises per guidelines above
- Submaximal isometrics for shoulder musculature
- Cryotherapy and modalities for pain and inflammation every hour for 20 minutes

Weeks 4 to 6

Range of Motion
- Week 6
  - External rotation to tolerance
  - Internal rotation: 60 degrees
  - Abduction to tolerance

Exercises
- Continue passive and gentle active assistive range of motion exercises per guidelines above
- Continue submaximal isometrics
- Wand active assisted exercises
- Initiate pulleys (adhere to range of motion guidelines)
• Gentle joint mobilizations (avoid posterior glides)
• Side lying external rotation/abduction
• Continue cryotherapy for pain management

Phase II: Intermediate (Weeks 7 to 12)

Goals
• Full, non-painful range of motion by week eight (except internal rotation)
• Normalize arthrokinematics
• Increase strength
• Improve neuromuscular control

Weeks 7 to 9

Range of Motion
• Restore full range of motion at week eight

Exercises
• Gradually progress range of motion per the guidelines above
• Continue joint mobilizations
• Initiate external rotation/internal rotation tubing exercises (arm at side)
• Initiate isotonic dumbbell program:
  • Shoulder abduction, flexion
  • Latissimus dorsi
  • Rhomboids
  • Biceps
  • Triceps
  • Shoulder shrugs
  • Wall push ups
• Initiate neuromuscular control exercises for the scapulothoracic joint

Weeks 10 to 12

Exercises
• May initiate slightly more aggressive strengthening:
  • Supraspinatus
  • Tubing exercises for rhomboids, latissimus dorsi, biceps, triceps

Exercises
• Continue all stretching exercises (progress range of motion to functional demands)

Phase III: Dynamic Strengthening (Weeks 13 to 20)

Criteria to Progress to Phase III
• Full, non-painful range of motion
• No pain or tenderness
• Muscular strength to 70 percent of contralateral side

Goals
• Improve muscular strength, power and endurance
• Improve neuromuscular control

Weeks 13 to 15

Exercises
• Continue all stretching exercises (capsular stretches)
• Continue exercises as listed above
• Fundamental exercises
• Endurance training

Weeks 16 to 20
Exercises
• Continue exercises as listed above
• Emphasis on gradual return to recreational activities

Phase IV: Return to Activity (Weeks 21 to 28)
Criteria to Progress to Phase IV
• Full, non-painful range of motion
• Satisfactory static stability
• Satisfactory clinical exam
• No pain or tenderness

Goals
• Progressively increase activities to prepare patient for unrestricted functional return

Weeks 20 to 28
Exercises
• Continue flexibility exercises
• Continue isotonic strengthening program
• Plyometric strengthening
• Initiate interval sport programs

Phase V: Return to Activity (Months 6 to 9)
Criteria to Progress to Phase V
• Full functional range of motion
• Satisfactory isokinetic test that fulfills criteria
• Satisfactory shoulder stability
• No pain or tenderness

Goals
• Gradual return to sport activities
• Maintain strength, mobility and stability

Months 7 to 9
Exercises
• Gradually progress sports activities to unrestricted participation
• Continue stretching and strengthening program