Chris Bales, MD

Orthopedic Surgeon
[P] 317.275.6193 • [F] 317.802.2868
DrChrisBales.com

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. Bales)
- 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 unrestrictive participation
- Continue stretching and strengthening program