



Physical Therapy Protocol – Arthroscopic Subscapularis Repair

	Immobilizer	Range of Motion	Therapy
Phase I 0-4 weeks	Worn at all times except for therapy and hygiene.	Start PROM only at 3 weeks. <u>Limits:</u> <ul style="list-style-type: none"> • FF- 90 degrees • Abd- 90 degrees • ER- max 45 degrees at side • Extension- 20 degrees 	<ul style="list-style-type: none"> • Elbow/wrist/hand ROM, grip strength. • Pendulums. • Isometric scapular stabilization exercises. • Avoid stretch anterior capsule and extension. • No active internal rotation.
Phase II 4-6 weeks	Discontinue sling at 4-6 weeks.	Continue PROM, advance as tolerated. <u>Goals:</u> <ul style="list-style-type: none"> • FF- 140 degrees • Abd- 120 degrees • ER- as tolerated 	<ul style="list-style-type: none"> • Gentle active-assisted exercises without resistance. • Pulleys. • No active internal rotation.
6-8 weeks	None	Begin active/active assisted ROM PROM to tolerance	<ul style="list-style-type: none"> • Continue Phase I work. • No active IR until 8 weeks
Phase III 8-12 weeks	None	Progress to full active motion. No restrictions. Begin posterior capsular stretching.	<ul style="list-style-type: none"> • Begin active-assisted • Active exercises with light resistance. • Therabands. • Continue scapular strengthening. • Add IR/ER isometrics.
Phase IV 3-8 months	None	Full painless motion.	<ul style="list-style-type: none"> • Advance Theraband strengthening. • Begin light weights. • Begin functional sport/work specific activities. • 6 -8 months: return to prior activity level and sports if cleared by surgeon.

* If a biceps tenodesis was performed, no resisted biceps strengthening for 8 wks post-op.

**If a distal clavicle excision was performed, no horizontal adduction for 8wks postop.