

Tristan Juhan, MD

Orthopedic Surgeon

Office: 408-412-8100**Email:** tjuhan@goldenstateortho.com**Website:** tristanjuhanMD.com

ARTHROSCOPIC ANTERIOR STABILIZATION REHABILITATION PROTOCOL

	RANGE OF MOTION	IMMOBILIZER	EXERCISES
PHASE I 0-6 weeks	0-3 weeks: None 3-6 weeks: begin PROM Limit flexion to 90°, external rotation to 45°, extension to 20°	0-2 weeks: Immobilized at all times day and night Off for hygiene and gentle exercise only 2-6 weeks: Worn daytime only	0-3 weeks: elbow/wrist ROM, grip strengthening at home only 2-6 weeks: begin PROM activities – Codman’s, posterior capsule mobilizations; avoid stretch of anterior capsule and extension; closed chain scapula
PHASE II 6-12 weeks	Begin active/active assistive ROM, PROM to tolerance Goals: Full extension rotation, 135° flexion, 120° abduction	None	Continue Phase I work; begin active-assisted exercises, deltoid/rotator cuff isometrics at 8 weeks Begin resistive exercises for scapular stabilizers, biceps, triceps and rotator cuff*
PHASE III 12-16 weeks	Gradual return to full AROM	None	Advance activities in Phase II; emphasize external rotation and latissimus eccentrics, glenohumeral stabilization Begin muscle endurance activities (upper body ergometer) Cycling/running okay at 12 weeks
PHASE IV 4-5 months**	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 activities, return to full activity as tolerated

*Utilize exercise arcs that protect the anterior capsule from stress during resistive exercises, and keep all strengthening exercises below the horizontal plane in phase II

**Limited return to sports activities