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Posterior Labrum Repair Rehabilitation Guidelines

Sling x 6 weeks (Abduction pillow x 6 weeks) except for bathing and PT

Phase I – Immediate Postoperative Phase: “Restrictive Motion” (Day 1 through Week 6)

Goals: Protect surgical repair

Retard Muscle atrophy of the entire upper extremity complex

Improve neuromuscular control of the scapula in the neutral glenohumeral position

Decrease pain and inflammation

Precautions:

- Patient to remain in sling at all times except for dressing/bathing through week 6
- No PROM/AROM of the shoulder
- Avoid stressing the posterior labrum (and repair)

*Avoid extremes of cross arm ADduction

Activities:

- Post-surgical brace and/or splint can be removed 2-3 times per day for gentle PROM/AROM of elbow, wrist, and hand
- Gentle scapulothoracic stabilization/mobilization
- Active elbow flexion and extension
- May squeeze soft ball
- Cryotherapy
- Discontinue use of sling at 6 week office visit

Phase II: Motion

Post-Op Weeks 7-9

1. D/C sling
2. Full ROM in all planes
3. Start posterior capsular stretching
4. Progressive strengthening (light)
5. Progress scapular stabilization exercises

Post-Op Weeks 10-12

Goals

1. Full ROM

2. Regain and improve upper extremity muscular strength
3. Improve neuromuscular control of the entire upper extremity complex
4. Normalize arthrokinematics of the shoulder in single planes of motion

Activities

1. Scapular stabilizer strengthening (rowing)
2. Neutral rotation rotator cuff strengthening
3. Stretching - all planes
4. Rhythmic stabilization 30, 60, 90, and 120 degrees (progressively)
5. 10 weeks post-op initiate isokinetics in neutral, scapular plane, high speeds

Phase III: Strengthening

Post-Op Weeks 12-14

Goals

1. 90% rotator cuff strength
2. Good tolerance to rotator cuff and ballistic activity
3. Prepare athlete for gradual return to functional activities

Criteria to progress to Phase III

1. Full ROM
2. Minimal pain and tenderness

Activities

1. Advance rotator cuff strengthening to 90 - 90 shoulder work
2. Initiate plyometric progression program and advance as tolerated

Phase IV: Dynamic Strengthening

Post-OP Weeks 14 - 16

Goals

1. Progressively increase activities to prepare patient for full functional return

Criteria to progress to Phase IV

1. Full, non-painful ROM
2. Pain-free plyometrics / 90 - 90 shoulder work
3. Satisfactory isokinetic evaluation

Activities

1. Full strengthening as tolerated.
2. Sport specific PT
3. Cleared for light non-contact sports as comfort allows and strength near maximum

Phase V: Return to Play

Cleared for contact sports, aggressive sports