



317-208-3866

## **BADMAN ARTHROSCOPIC SUPERIOR CAPSULAR RECONSTRUCTION PROTOCOL (SCR)**

### **Phase I – Protective Phase (Weeks 0 – 6)**

#### **Goals:**

- Protect integrity of graft
- Gradual increase in PROM/AAROM
- Decrease pain and inflammation
- Prevent muscular inhibition

#### **Precautions:**

- Wear brace/sling at all times except when performing prescribed exercises
- No lifting of objects at all
- No excessive shoulder extension or behind back motions
- No sudden movements or stretching
- No supporting of body weight on arm

#### **Weeks 0 – 2:**

- Sling/swathe for 6 weeks with abduction pillow
- Perform elbow/hand/wrist ROM exercises
- Perform PROM to tolerance:
  - Flexion
  - ER/IR (scapular plane)
- Strengthening:
  - Hand gripping exercises
  - Sub-maximal/pain-free isometrics:
    - Elbow flexors
    - ER/IR in scapular plane
- Pain control modalities (ice 15 – 20 minutes several times a day)



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### **Weeks 3 – 4:**

- Continue brace or sling
- May initiate pendulums (no bigger than softball)
- PROM:
  - Flexion to tolerance
  - ER/IR to tolerance in scapular plane
  - ER/IR to 45° @ 90° abduction
- AAROM:
  - ER/IR to tolerance in scapular plane
- Strengthening:
  - Rhythmic Stabilization drills
    - Flexion/Extension at 90-100° of flexion in supine
  - ER/IR in scapular plane
  - Sub-maximal/pain-free isometrics (all with bent elbow):
    - Flexion
    - Abduction
    - ER/IR
    - Extension in neutral
- Continue pain control modalities

### **Weeks 5 – 6:**

- Continue brace or sling until discharged by physician
- Progress to full PROM as tolerated
- AAROM:
  - Flexion to 130°
  - ER/IR to tolerance in scapular plane
  - Initiate gentle ER/IR to 45° at 90° abduction
- AROM:
  - Flexion to 90° if no shoulder hiking
- Strengthening:
  - Tubing ER @ 0° abduction Isotonics (light):
    - Prone rows to neutral arm position



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Prone horizontal abduction

Bicep curls

- Continue pain control modalities

## **Phase II – Intermediate Phase (Weeks 7 – 12)**

### **Goals:**

- Establish full A/PROM by 12 weeks
- Gradual increase in shoulder strength
- Gradual return to light functional activities

### **Weeks 7 - 9:**

- Discharge brace and sling
- Maintain full PROM with gentle stretching as needed
- Upper extremity cycle
- AAROM:
  - Flexion to tolerance
  - ER/IR to tolerance in scapular plane
  - ER/IR to tolerance at 90° abduction
- AROM:
  - Lying flat as tolerated forward elevation
- Strengthening:
  - Continue/progress rhythmic stabilization drills
  - Continue tubing ER at 0° abduction working on endurance Tubing scapular strengthening to neutral working on endurance
  - Isotonics (gradually progress resistance):
    - Flexion to 90° (no resistance until AROM is performed without hiking) ER/IR in side lying
    - Prone rows
    - Prone horizontal abduction
    - Biceps/triceps

### **Weeks 10 – 12:**

- Maintain PROM/AAROM with gentle stretching if needed
- Progress AROM in supine



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- Strengthening:
  - Continue/progress tubing endurance program
  - Continue/progress isotonic strengthening program
- Begin light functional activities (no overhead activities)

### **Phase III – Advanced Strengthening Phase (13 – 20 Weeks)**

#### **Goals:**

- Maintain full, non-painful ROM
- Improve strength of general shoulder musculature focusing on deltoid/parascapular
- Improve neuromuscular control
- Gradual return to all functional activities

#### **Weeks 13 – 20:**

- Maintain full PROM/AROM
- Perform self-capsular stretches if motion is tight
- Strengthening program:
  - Continue isotonic/tubing and stabilization strengthening
  - Closed chain stabilization drills
  - High-speed isokinetics for ER/IR in neutral (16 weeks) Begin general shoulder strengthening with precautions:
    - Latissimus pulls with narrow grip and arms in front of body
    - Chest press with light dumbbells keeping elbows anterior to shoulder
    - Machine rows
    - Military press with light dumbbells and arms in front only

### **Phase IV – Return to Activity Phase (Weeks 21 – 24)**

#### **Goals:**

- Gradual return to recreational and occupational activities
- Educate patient on limitations of shoulder (will have strength deficits with arm abducted and weight applied—from lack of supraspinatus)



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**Weeks 21 – 24:**

- Continue all strengthening exercises
- Continue all ROM/flexibility exercises