Sutter Health

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Arthroscopic Subacromial Decompression Protocol:

The intent of this protocol is to provide the therapist with guidelines of the post-operative rehabilitation course. It should not be a substitute for one's clinical decision making regarding the progression of a patient's post-operative course based on their physical exam findings, individual progress, and/or the presence of post-operative complications. The therapist should consult the referring physician with any questions or concerns.

Phase I (Weeks 1-2)

Goals

- Restore non-painful ROM
- Retard muscular atrophy and prevent muscular inhibition
- Decrease pain/inflammation
- Improve postural awareness
- Minimize stress to healing structures
- Independent with ADLs
- Wean from sling

Precautions

- Care should be taken with abduction (with both active range of motion (AROM) and passive range of motion (PROM) to avoid unnecessary compression of subacromial structures
- Creating or reinforcing poor movement patterns, such as excessive scapulothoracic motion with upper extremity elevation, should be avoided

Range of Motion

- PROM (non-forceful flexion and abduction), AROM, and AAROM
- Pendulums
- Pulleys
- Cane exercises
- Self stretches

Strengthening

- Isometrics: scapular musculature, deltoid, and rotator cuff as appropriate
- Isotonic: theraband internal and external rotation in 0 degrees abduction

Modalities

- Cryotherapy
- Electrical stimulation to decrease pain and swelling PRN

Criteria for progression to phase II

- Full active and passive ROM
- Minimal pain and tenderness

Phase 2: Intermediate Phase (Weeks 2-6)

Goals

- Regain and improve muscular strength
- Normalize arthrokinematics
- Improve neuromuscular control of shoulder complex

Exercises

- Initiate isotonic program with dumbbells
- Strengthen shoulder musculature- isometric, isotonic, Proprioceptive Neuromuscular Facilitation (PNF)
- Strengthen scapulothoracic musculature- isometric, isotonic, PNF
- Initiate upper extremity endurance exercises

Manual Treatment

- Joint mobilization to improve/restore arthrokinematics if indicated
- Joint mobilization for pain modulation

Modalities

- Cryotherapy
- Electrical stimulation to decrease pain and swelling PRN

Criteria for progression to Phase III

- Full painless ROM
- No pain or tenderness on examination

Phase 3: Dynamic (Advanced) Strengthening Phase (Week 6+)

Goals

- Improve strength, power, and endurance
- Improve neuromuscular control
- Prepare athlete to begin to throw, and perform similar overhead activities or other sport specific activities

Emphasis of Phase 3

- High speed, high energy strengthening exercises
- Eccentric exercises

- Diagonal patterns

Exercises

- Continue dumbbell strengthening (rotator cuff and deltoid)
- Progress theraband exercises to 90/90 position for internal rotation and external rotation (slow/fast sets)
- Theraband exercises for scapulothoracic musculature and biceps
- Plyometrics for rotator cuff
- PNF diagonal patterns
- Isokinetics
- Continue endurance exercises (UBE)