

## Superior Capsular Reconstruction

### **Phase 1 – Maximum Protection**

#### **Weeks 0 to 4**

- Wear sling at all times
- No glenohumeral joint (GHJ) range of motion for 4 weeks

#### Goals:

- Reduce pain and inflammation
- Protect surgical repair
- Postural education

#### Exercise Progression:

- No GHJ ROM for 4 weeks
- Cervical ROM and basic deep neck flexor activation (chin tucks)
- Hand and wrist AROM
- Elbow flexion PROM
- Active shoulder retraction
- Encourage walks and low intensity cardiovascular exercise to promote healing

### **Phase 2 – Passive Range of Motion**

#### **Weeks 4 to 6**

- Wear sling at all times (at 5 weeks transition to sling without pillow for final week)
- Initiate PROM
  - No shoulder extension past neutral
  - No internal rotation past 30 degrees
- Initiate AAROM in supine

#### Goals:

- Reduce pain and inflammation
- Protect surgical repair
- Postural education with cervical spine and neutral scapular positioning
- Shoulder PROM:
  - Flexion to 150 degrees by week 6
  - Abduction and scaption to 120 degrees by week 6
  - Internal rotation 0-30 degrees at 45 degrees abduction by week 6
  - External rotation 0-60 degrees at 45 degrees abduction by week 6
  - No shoulder extension past neutral

Manual Therapy:

- Graded glenohumeral and scapulothoracic mobilization
- Scar tissue mobilization when incision are healed
- STM to shoulder and cervicothoracic complex

Exercise Progression:

- PROM shoulder exercises
- AAROM/AROM exercises of wrist, hand, and elbow
- AAROM exercises of shoulder in supine
- DNF and proper postural positioning with shoulder retraction
- Shoulder pendulums
- Low to moderate intensity cardiovascular work (walking or stationary bike)

**Phase 3 – Active/Active Assisted Range of Motion**

**Weeks 6 to 8**

- Discontinue sling at 6 weeks
- Continue PROM
- Initiate AAROM in upright position
- Initiate AROM at 90 degrees

Goals:

- Reduce pain and inflammation
- Shoulder PROM:
  - Progress ROM as tolerated in all directions

Manual Therapy:

- Graded glenohumeral and scapulothoracic mobilizations
- Scar tissue mobilization when incision are healed
- STM to shoulder and cervicothoracic complex

Exercise Progression:

- AAROM in supine and upright position – cane, pulleys
- AROM up to 90 degrees flexion/scaption/abduction
- Manual perturbations with arm at 90 degrees flexion and ER/IR in neutral
- Initiate posterior capsular stretching at 6 weeks
- Serratus activation
- Low to moderate intensity cardiovascular work

#### **Phase 4 – Progressing Range of Motion**

##### **Weeks 8 to 12**

- Progress to full PROM and AROM
- Normalize glenohumeral and scapulothoracic arthrokinematics
- Initiate submaximal isometrics at 8 weeks

##### Goals:

- Shoulder PROM in all directions by week 10

##### Manual Therapy:

- PROM and mobilizations to progress ROM
- Manual perturbations in supine with arm in 90 degrees flexion and ER/IR at neutral
- PNF patterns

##### Exercise Progression:

- Submaximal isometrics in all directions
- Full PROM and AAROM at shoulder
- Shoulder AROM at and below 90 degrees
- Initiate UE bike at 10 weeks below 90 degrees shoulder flexion
- Prone and sidelying shoulder AROM below 90 degrees for scapulohumeral muscle activation

#### **Phase 5 – Progressing Strength and Plyometric Drills**

##### **Weeks 12 to 24**

- Full AROM/PROM
- Progress shoulder AROM above 90 degrees at 12 weeks
- Initiate strengthening at 12 weeks with gradual progression
- Initiate plyometric drills at 18 weeks post op
- Follow up examination with physician at 6 months for release to full activity

##### Goals:

- Full range of motion
- Begin strengthening program at 12 weeks
- Initiate plyometric exercises at 18 weeks

##### Manual Therapy:

- STM and joint mobilization to glenohumeral, scapulothoracic, and cervicothoracic as needed
- Manual perturbations
- PNF patterns



Exercise Progression:

- End range stretching to achieve full ROM in all directions
- Progress UE bike above 90 degrees at 12 weeks as tolerated
- Initiate and progress rotator cuff and scapular strengthening program
- Initiate plyometric and rebounder drills
- Closed kinetic chain exercises for scapular and core stability
- Able to progress to elliptical and running for cardiovascular health at 12 weeks