Mr Mark S. Falworth MBBS FRCS(Eng) FRCS (Orth)

Consultant Orthopaedic Surgeon Shoulder and Elbow Surgery

Spire Bushey Hospital Heathbourne Road Bushey Watford Herts, WD23 1RD Royal National Orthopaedic Hospital Brockley Hill Stanmore Middlesex HA7 4LP The Stanmore Clinic HCA Elstree Waterfront The Waterfront Beaufort House, Elstree Rd. Herts, WD6 3BS

Appointments & Queries; Practice Manager: Lynn Etherton Telephone: 020 7042 1807 Fax: 020 7042 1808

Email: lynn.ertherton@phf.uk.com

All correspondence to Spire Bushey Hospital

Physiotherapy protocol: Posterior Labral Repair / Stabilisation

Weeks 1-6:

- ER brace / sling for 6 weeks
- Restrict motion to 90° FF/ 20° ER with arm at side/ IR to neutral/ 45° ABD
- PROM → AAROM → AROM as tolerated
- No cross-body adduction until 6 weeks post-op
- Isometrics in sling
- Heat before/ice after Physio sessions

Weeks 6-8:

- Remove sling at week 6
- Increase AROM 160° FF / 45° ER at side / 160° ABD / IR behind back to waist
- Strengthening (isometrics/light bands) within AROM limitations, horizontal abduction exercises
- Also start strengthening scapular stabilisers (traps/rhomboids/lev. scap/etc)

Weeks 8-12:

- If ROM lacking, increase to full with gentle passive stretching at end ranges but only aim for half of inernal rotation of the normal side at 3 months
 post-op.
- Advance strengthening as tolerated: isometrics → bands → light weights (1-5 lbs); 8-12 reps/2-3 set per rotator cuff, deltoid, and scapular stabilisers

Months 3-12:

- Only do strengthening 3x/week to avoid rotator cuff tendonitis
- Begin eccentrically resisted motions, proprioception and closed chain exercises at 12 weeks.
- Return to gentle throwing at 4 ½ months
- Full ballistics at 6 months

Comments: