# PHYSICAL THERAPY PRESCRIPTION

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PATIENT STICKER

DATE OF SURGERY:	
DIAGNOSIS: (LEFT /	RIGHT) ARTHROSCOPIC ROTATOR CUFF REPAIR

#### ARTHROSCOPIC SHOULDER SURGERY PHYSICAL THERAPY PRESCRIPTION

### NO ACTIVE shoulder ROM against gravity until 6 weeks after surgery

#### 1-2 WEEKS POST-OP:

- \* Passive supine elevation using the opposite hand to 90 degrees. Passive ER to neutral.
- \* Modalities, cryocuff, prn
- \* Hand, wrist, elbow, PRE's

#### 2-3 WEEKS POST-OP:

- \* Start pendulums, passive supine elevation, passive ER
- \* Pulley exercises for flexion, as tolerated. Use cane for ER; towel to increase IR.
- \* Begin scapular strengthening program, in protective range
- \* Deltoid isometrics

#### 3-5 WEEKS POST-OP:

- \* Joint mobilization & PROM as necessary (passive supine elevation, passive ER)
- \* Deltoid isometrics
- \* Modalities as needed
- \* Begin submaximal IR / ER isometric exercises in neutral, arm at side (week 5)
- \* Continue scapular strengthening

## 5-7 WEEKS POST-OP:

- \* ROM activities, emphasize flexion. Gentle passive stretch to 120 degrees forward flexion
- \* Deltoid isotonics in plane of scapula, only after positive rotator cuff strength is determined (especially forward flexion)
- \* Continue with scapular PRE's. Begin biceps PRE's.
- \* Continue with modalities, prn.

## 7-11 WEEKS POST-OP:

- \* Progress Rotator cuff isotonics
- \* Restore full ROM by 12 weeks
- \* Continue with aggressive scapular exercises
- \* Upper extremity PRE's for large muscle groups, i.e. pects, lats, etc. at 12 weeks.
- \* Begin isokinetic program, IR / ER emphasize eccentrics
- \* Continue with flexibility activities

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# 11-16 WEEKS POST-OP:

- \* Aggressive upper extremity PRE's
- \* IR / ER isokinetics, velocity spectrum
- \* Begin plyometric program for overhead athletes
- \* Continue with throwing and racquet program if appropriate
- \* Posterior capsule stretching after warm-ups
- \* Progress PRE's from side for overhead athletes

Treatment:	_ times per week	Duration:	weeks
Physician's Signature: _			
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