



**Orthopaedic Associates of Zanesville**  
**Sports Medicine Division Physical Therapy Protocols**  
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**Rehabilitation Guidelines for Shoulder Arthroscopy Debridement/Subacromial Decompression and/or Distal Clavicle Excision/Capsular Release**

The intent of this protocol is to provide the clinician with a general guideline of the post-operative course of the patient that has undergone the above stated procedure. It is by no means intended to 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 possible post-operative complications. If a clinician requires assistance in the progression, please contact the referring surgeon's office.

**0-4 Weeks:**

- Sling for Comfort (1-2 days) Then discontinue
- Passive to Active shoulder ROM as tolerated
  - 140° Forward Flexion
  - 40° External Rotation with arm at side
  - Internal rotation behind back with gentle posterior capsule stretching
  - No rotation with arm in abduction until 4 wks.
- With distal clavicle excision, hold cross body adduction until 8wks.
- Grip Strength, Elbow/Wrist/Hand ROM, Codman's
- Avoid Abduction and 90/90 ER until 8wks

**4-8 Weeks:**

- Advance ROM as tolerated (Goals FF to 160°, ER to 60°)
- Begin Isometric exercises
- Progress deltoid isometrics
- ER/IR (submaximal) at neutral
- Advance to TheraBand as tolerated

**8-12 Weeks:**

- Advance to full, painless ROM
- Continue strengthening as tolerated
- Begin eccentrically resisted motion and closed chain activities
- Only do strengthening 3times/wk. to avoid rotator cuff tendonitis