

Arthroscopic Superior Capsular Reconstruction Rehabilitation with Allograft

Dr. Matthew Hwang

General Considerations:

Continually monitor for signs of infection. Encourage icing program. Consider patient age and tissue quality. Monitor for signs of adhesive capsulitis

Time Frame	Treatment	Goals
Post-Op Day 0-3 weeks post surgery	Do no lift arm against gravity No resistive shoulder activities HEP: Shoulder shrugs/scapular squeezes; AROM to hand, wrist and elbow; Codman's Pendulum ex per patient tolerance. Gentle shoulder isometrics with 90° elbow flexion with arm at side. PROM flex scaption See 2-3 x weekly	Promote optimal healing of tissue Pain free at rest 90° Flexion/Scaption
3-6 weeks post surgery	PROM only flexion and scaption until 4 weeks Scapular and trap work with light resistance AAROM starting at 4 weeks (per MD) See 1-3x weekly	110° flexion/scaption Rotator cuff and deltoid 2/5 strength
6-12 weeks post surgery	Start AROM at 6 weeks PROM progression to full ROM as tolerated Begin IR /ER PROM See 1-3 x weekly	Full ROM 3/5 strength
12-24 weeks post surgery	AROM all directions progressing to PREs See in clinic if needed Provide patient with independent HEP for further RC/Shoulder needs	5/5 Strength

Phase IV		
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