



Post-Operative Rehabilitation Guidelines: Shoulder Stabilization with or without Labral Repair

Phase I: 0-4 Weeks

1. Abduction or external brace x4 weeks
2. Grip Strength, Elbow/Wrist/Hand ROM, Codmans exercises

Phase II: 4-6 Weeks

1. Discontinue brace at 4 weeks unless otherwise indicated
2. Begin PROM → AAROM → AROM
3. Restrict forward flexion to 90°; ER at side to tolerance; IR to stomach
4. Begin isometric exercises with arm at side
5. Deltoid/Scapular ER/IR (submaximal) with arm at side
6. Begin strengthening scapular stabilizers
7. **No** cross body adduction
8. **No** manipulations per therapist

Phase III: 6-12 Weeks

1. Increase ROM within 20° of opposite side
2. Encourage patient to work on ROM daily
3. Continue isometrics with arm at side
4. Once FF reaches 40° → advance strengthening as tolerated: isometrics → bands → light weights (1-5 lbs); 8-12 reps/2-3 set per rotator cuff, deltoid, and scapular stabilizers.
5. Limit strengthening to 3 times per week to avoid rotator cuff tendonitis
6. Closed chain exercises
7. **No** manipulations per therapist

Phase IV: 3-12 Months

1. Advance to full painless ROM
2. Begin eccentrically resisted motions, plyometrics (i.e. weighted ball toss), proprioception (i.e. body blade), and closed chain exercises at 12 weeks.
3. Begin sports related rehab at 3 months, including advanced conditioning
4. Return to throwing at 4.5 months → throw from mound at 6 months → MMI ~ 12 months

Important Information

- *Office Hours:* Monday – Friday; 7:30am –4:30pm
- *After Hours/Emergency Contact:* Resident/Fellow – 708.236.2600
- *Central Scheduling:* 708.236.2701 | <https://rushortho.radixhealth.com/dash/self/#/schedule/29>
- *Administration:* Jeannie Taylor – 312.432.2525
- *Physician Assistants:* Sara, Delaney, & Erica – 312.432.2388 | nhopa@rushortho.com

We are in clinic or surgery and not answering calls in real time – we will return all voicemails within 24-48 hours.