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*0 to 6 weeks:*

1. 2 visits per week, everyday home program
2. Sling may be discontinued on post-op day 1 and worn only as desired.
3. Active and passive range of motion of the neck, elbow, wrist and hand should be performed 5 times/day everyday
4. Avoid any active shoulder motion for the first 6 weeks.
5. Gentle passive pendulum exercises should be started immediately to be performed 3 times a day
6. Icing program, 3 to 5 times a day, 30 minutes each after exercises
- 7.

*3 to 6 months:*

1. 1 to 2 visits per week, with a home program 5 times a week.
2. Continue exercises in previous phases (as described above)
3. A strong emphasis on periscapular strengthening and range of motion exercises should continue with scapular protraction, retraction, and elevation
4. Rotator cuff strengthening exercises (with bands and dumbbells) may begin once active range of motion is full

*6 to 9 months:*

1. 4 to 5 times a week home program. 1 to 2 visits per week to advance home program.
2. Continue exercises in previous phases (as described above)
3. Active shoulder girdle, rotator cuff, and periscapular muscle strengthening exercises are the focus of this period with the emphasis to regain full strength. Strengthening exercises should be high repetition, low weights with dumbbells and bands

*9 to 12 months:*

1. 3 to 5 times a week home program. May need physical therapy supervision for functional training.
2. Begin gradual return to previous sports/activities/work duties under controlled conditions
3. Full return to sports/activities/full work duties are pending Dr. Kaar's approval based upon the following criteria:

*Discharge Criteria:*

1. Maximize ROM
2. Full independent ADLs
3. Independent HEP