

The Orthopedic Center of St. Louis

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Open Subscapularis Repair

Post-Op	Goals	Precautions	Exercises		
Weeks 0-4	Edema and pain control	Sling at all times, including sleep	Codman/Pendulum		
	Protect surgical repair	Remove for hygiene and exercises	Side-lying scapular stabilization		
PT 1x/week	Sling immobilization	No ER past neutral	Elbow, wrist, hand ROM		
HEP daily		No active IR	Gripping exercises		
Weeks 4-12	Protect surgical repair	Sling except shower and exercises	Weeks 4-6:		
	Restore ROM	DC sling at 6 weeks	Joint mobilizations		
PT 2-3x/week		No ER >30° until 6 weeks	Scapular stabilization		
HEP daily	Gradual return to light	NO FF >90° until 6 weeks	Deltoid, biceps, triceps isometrics		
	ADLs below 90° elevation	No extension >20° until 6 weeks No active IR until 6 weeks	PROM: FF plane scapula 120°, ER 20°		
	Normal scapulohumeral	No resisted IR until 12 weeks	Weeks 6-12:		
	rhythm below 90°		Advance scapular stabilization		
	elevation		Improve scapulohumeral rhythm below		
			90°		
			Progress AA/PROM to FF 155°, ABD		
			135°, ER 45°, ABER 90°, ABIR 45°		
			AROM plane scapular (supine to		
			standing)		
			Begin ER and IR isometrics		
			Hydrotherapy if available		
Weeks 12-20	Full ROM	Avoid painful ADLs	A/AA/PROM no limits		
	Normalize scapulohumeral	Avoid rotator cuff inflammation	Continue scapular stabilization		
PT 2-3x/week	rhythm throughout ROM	Avoid excessive passive stretching	Advance scapulohumeral rhythm		
HEP daily	Restore strength 5/5	OK to begin running/cycling	Endurance: upper body ergometer (UBE)		
			Begin resistive strengthening for		
			scapula, biceps, triceps, and rotator cuff		
Weeks 20+	Full ROM and strength	Avoid painful activities	Advance eccentric training		
	Improve endurance	OK to cycle/run at 12 weeks	Initiate plyometrics		
PT 1-2x/week	Prevent re-injury	No contact/racquet/throwing sports	Advance endurance training		
HEP daily		Return to sport (MD directed)	Sport-specific activities		
			Throwing/racquet program: 5 months		
			Contact sports: 6 months		

AMENDMENTS TO PROTOCOL FOR CONCOMITANT PROCEDURES

Distal Clavicle	Evcicion	Modes 0 9.	no cross had	v adduction	abduction	\ 00° 0	r rotation	in C	ەمد
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☐ Biceps Tenodesis:

Weeks 0-4: no active elbow flexion Weeks 4-8: begin biceps isometrics

Weeks 8+: begin biceps resistance training