

SHOULDER INFERIOR CAPSULAR SHIFT PROTOCOL

0-4 Weeks:

- Immobilization with sling on at all times, except distal arm ROM and bathing
- Elbow, wrist, and hand AROM 4x/day minimum
- Cryocuff/ice for pain

4-6 weeks:

- Decrease use of sling during the day except in uncontrolled situations. Strict ROM limits to: 120 flexion, 90 abduction, 30 external rotation
- PROM, AAROM (wand, pulley), and AROM within pain tolerance and limits
- Supervised UBE within shoulder AROM within pain tolerance and limits
- Manual resistance for scapular motions
- Gentle soft tissue and joint mobilization
- Modalities as indicated for pain or inflammation

6-12 Weeks:

- Discontinue sling at night
- Progress AAROM and AROM as tolerated
- Joint mobilization of scapula (gentle glenohumeral as indicated)
- Strengthening exercises for scapula stabilizers and rotator cuff within pain free ranges
- May include PRE's, PNF, and weight equipment
- Emphasis of strengthening on high reps and low weight, with postural awareness
- Progress toward independent strengthening program
- Reinforce postural awareness, quality of exercise technique, and proper PRE progression.
- Goal: AROM > 90 percent of normal range for the involved shoulder by 12 weeks

6 Months:

- Begin functional throwing program
- Continue with independent program-strength, stretch, and sports specific drills

9 Months:

- Possible return to full strength throwing and contact sports depending on strength and physician assessment