

Shoulder Pain/PAS/Tendonitis/Rotator Cuff Strain/ Non Operative RTC Tear

****DISCLAIMER:** Total length of rehab will vary depending upon the following factors: severity or acuteness of injury, age, health, or personal goals of the patient.

Patient can be progressed through phases of protocol more rapidly than time frames given, as tolerated

Phase I: 0 – 2 weeks

Goals for Phase I:

1. Restore functional ROM
 2. Reduce pain and inflammation
 3. Functional strength
 4. Restore normal passive and active caudal glide (capsular stretching as indicated and RTC strengthening)
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- A. ROM: Work to restore full active and passive ROM as tolerated. Avoid end range flexion and abduction > 90 degrees if subacromial inflammation present.
 - B. Joint Mobilizations: If impingement is due to hypomobility, then posterior and caudal glides should be performed to increase capsular laxity. Anterior glides performed in selective cases. If impingement is due to hypermobility, then capsular stretching and joint mobs should not be performed. If selective hypomobility is present, then stretch portions of capsule which is selectively tight and causing abnormal glenohumeral accessory motion.
 - C. Flexibility: pectoral and periscapular stretching as needed.
 - D. Strengthening: Begin with isometrics, ease into PRE's as tolerated, RTC and scapular stabilization exercises below 90 degrees of shoulder abd/flex.
 - E. Education: Instruct on avoiding impingement positions and activities (humeral IR if flexed or abducted > 80 degrees), lifting mechanics, home rest and ice.
 - F. Functional activities: use arm for ADL's as tolerated
 - G. Modalities: Use for pain, inflammation, swelling control.

Phase II: 2 – 4 weeks

Goals for Phase II:

1. Normal ROM
 2. Good strength
 3. Functional ADL's
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- A. ROM/Flexibility: Continue as needed
 - B. Strengthening: More aggressive PRE's, as patient tolerates
 - C. Functional activities: Increase functional use of arm as tolerated.
 - D. Modalities: Continue as needed

Phase III: Weeks 4 to release

1. Normal strength
 2. Release to full duty work/sports
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- A. Continue strengthening/conditioning/functional activities as needed
 - B. Biodex: Release to sports when involved arm 80% of uninvolved