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Physical Therapy following Arthroscopic Posterior Labral Repair

The following is a basic framework from which to work during rehabilitation following arthroscopic posterior labral repair. Physical therapists may employ specific exercises at their discretion within these guidelines. We encourage patients and therapists to communicate with Dr. Brusalis and his staff with any questions.

Please provide with a home exercise program to be perform throughout rehabilitation.

Phase	Timeframe	Guidelines
I	0-4 weeks	<ul style="list-style-type: none"> • Sling in neutral rotation for 4 weeks • Codman exercises • Elbow, wrist, and hand ROM • Wrist and grip strengthening
II	4-6 weeks	<ul style="list-style-type: none"> • Restrict to FF 90°/IR to stomach PROM → AAROM → AROM • ER with arm at side as tolerated • Begin isometrics with arm at side – FF/ER/IR/ABD/ADD • Start scapular motion exercises (traps/rhomboids/levator scapulae) • No cross-arm adduction
III	6-12 weeks	<ul style="list-style-type: none"> • Increase ROM to within 20° of opposite side; no manipulations per therapist • Encourage patient to work on ROM daily • Once 140° active FF, advance strengthening as tolerated <ul style="list-style-type: none"> • 8-12 reps, 2-3 sets per RC, deltoid, scapular stabilizers with low abduction angles • Only do strengthening 3x/week to avoid rotator cuff tendonitis • Closed chain exercises
IV	3-12 months	<ul style="list-style-type: none"> • Advance to ROM as tolerated • Begin eccentrically resisted motions, plyometrics, proprioception • Begin sports-related rehab at 3 months, including advanced conditioning • Return to throwing at 4.5 months • Push-ups at 4.5 – 6 months • Throw from pitcher’s mound at 6 months