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Physical Therapy for Frozen Shoulder

The following is a basic framework from which to work during rehabilitation for frozen shoulder (adhesive capsulitis). Therapists may select particular exercises to achieve these goals at their discretion. We encourage patients and therapists to communicate with Dr. Brusalis and his staff with any questions.

Instructions:

Range of motion:

- Please focus on increasing range of motion, with a focus on forward elevation, adducted external rotation, and adducted internal rotation.
- When working on flexion please block scapulothoracic and emphasize glenohumeral motion.
- No range of motion limitations.
- Mild discomfort while pressing into end-ranges is ok, but frank pain is not.
- Begin gently and progress as tolerated.

Strengthening:

- Ok to incorporate active range of motion and strengthening per therapist's preference, with no specific limitations. However, focus upon motion and not upon strengthening.

Home exercise program:

- Please provide with a home exercise program including table slides, wall climbs, cane exercises, and sleeper stretches, to be performed 3-4 times per day.

Modalities:

- Heat, massage, and pain medications before exercises and ice after.
- Remaining modalities per therapist's preference.
- Please apply modalities with the arm at end-ranges of motion, not in neutral-adduction.

Frequency: 2-3 times/week

Duration: 6 weeks