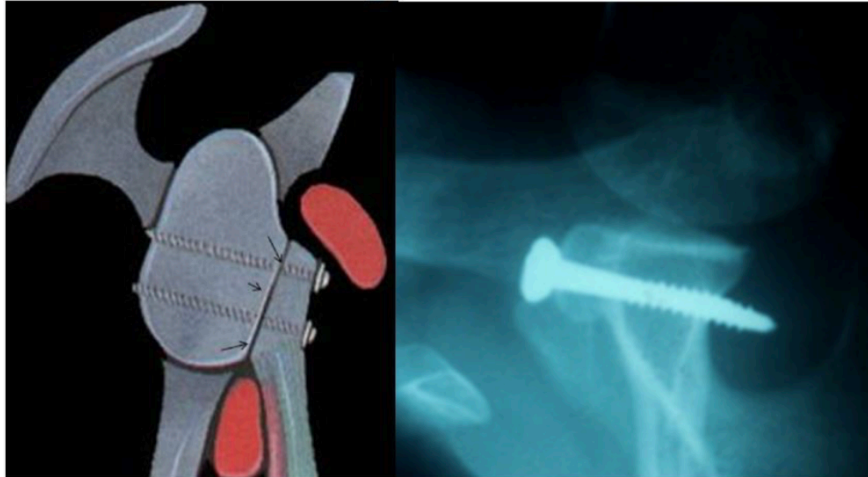


PHYSICAL THERAPY PROTOCOL AFTER LATARJET PROCEDURE:



This is a guideline for our patients who have undergone an open Latarjet procedure. It is intended to supplement the physical therapy you will receive by a trained physical therapist though in some cases your progress may not require extended hands on physical therapy as the on line videos here may be sufficient to guide your recovery if you are diligent in your performance of these exercises each day. Your surgeon may modify this program based on individual factors in your case, so please check the operative report you are given as it will outline the specific rehabilitation protocol in your case.

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Phase I – Protection and initial therapy program (Week 1-4):

Goals:

- Protect the integrity of the surgical repair
- Achieve gradual restoration of passive range of motion (PROM)
- Enhance/ensure adequate healing of the bone-to-bone of the Latarjet procedure

Activities and Precautions:

- Keep your arm in the sling except when performing exercises and when doing activities outlined below
- It will be easier to put on and take off a shirt if you wear a loose fitting shirt or one which buttons in the front. Do not raise your operated arm to put the shirt on. Simply slip the operated arm into the sleeve while keeping your arm at the side and then place the other arm into the other shirt sleeve.
- Avoid reaching out or lifting of objects
- Avoid shoulder motion behind back
- Avoid supporting of body weight by hands
- You can go in the shower several days after surgery but keep the dressing dry. After one week when the dressing is removed you can get the incision wet.
- Patient education regarding limited use of upper extremity despite the potential lack of or minimal pain or other symptoms
- Wear the sling except when performing pendulum exercises and other exercises as described below in this document. Your surgeon may allow you to remove the pillow portion of the sling.
- Wear your sling when you sleep. You can prop some pillows to the side of our operated arm and behind the back of our shoulder in order to avoid rolling onto the operated shoulder.
- Begin Pendulum exercises; you can use the ball that comes with the sling to squeeze in your hand as this will activate the muscles of your arm

- Continue to use cold therapy with the compression sleeve you have or a plastic bag of ice. This will markedly reduce discomfort. Do this Day 1-2: as much as possible and Day 3-6: after activity and exercises and also for pain. (IMPORTANT: USE TOWEL TO PROTECT SKIN AND PAUSE CRYOTHERAPY AT LEAST FOR 20 MIN/HOUR TO PREVENT FROSTBITES)
- You may remove the sling when you are sitting and you may type on a keyboard of your computer. You can use your hand, elbow and wrist but only minimally raise your arm at this time and you can bend your elbow and use your hand to eat.
- You will begin physical therapy for in order to recover range of motion. This will be either with a physical therapist or following the online video program exercises noted below. There will be no specific limits of the stretching you are permitted to do unless stated so in the operative report you receive.

You may exercise on a stationary bike or an elliptical if you can do so without using the operated arm which should remain in the sling.

Exercises and Online Videos (Click on links below):

[shoulder shrug and roll](#)

- Pendulum Exercises: (start of pendulum exercises unless your surgeon says otherwise. Please check your operative report.)

[pendulum exercises](#)

- Passive motion stretching exercises: The PROM exercises may be supervised by the physiotherapist during the first session. In addition, the PROM home exercises should be trained by the physiotherapist.

Self assisted exercises can start now according if approved by your surgeon and demonstrated by the physical therapist

Phase II – Active motion and self-assisted stretching (Week 5-8):

Goals and Guidelines:

- The sling can be removed after week 4 following surgery
- Start using your arm for daily activities like washing, dressing and driving
- Gradually start active range of motion
- Active stretching exercises should begin if they have not yet started and your physical therapist will help with this. Also see video links below for these exercises

Precautions:

- Avoid lifting anything heavy with your operated arm. In general lift only a cup or something of similar weight.
- You can start to work on scapular strengthening and some isometric exercises as directed by your physical therapist but no forceful internal rotation (pulling of arm inward)

Exercises and Online videos:

1. [flexion in supine position](#)
2. [sitting assisted forward reach \(elevation\)](#)
3. [standing wall-assisted forward flexion](#)
4. Cane-Assisted External Rotation at [20 degrees](#), [45 degrees](#) abduction
5. [Doorway Standing External Rotation](#)
6. [Scapular plane Abduction to Tolerance](#)
7. [Active Range of Motion Forward Flexion in the Scapular Plane](#)
8. Active Range Of Motion External Rotation in Multiple Positions: [Side-Lying](#) or [Sitting](#)

Phase III – strengthening phase (week 9-12):

Goal:

- Continue to improve range of motion by stretching
- Advance strengthening with elastic bands progressing to light weights
- Gradual return to functional activities: After 8 weeks you can jog, but no forceful use of operated arm and no activities that might allow you to fall or collide with an opponent in sports

Precautions:

- Avoid heavy lifting of objects (no heavier than 5 lbs.)
- Avoid sudden lifting or pushing activities
- No sudden jerking motions or collision or contact sports
- No weight lifting yet.

Start of strengthening with elastic bands and light weights is defined by the surgeon in the OR report. Do not start strengthening if the operation report states that strengthening should be started later. In patients with poor bone quality, strengthening is occasionally started later.

Exercises and online videos:

1. [Active Range of Motion External Rotation with Band Strengthening](#)
2. [Active Range of Motion Internal Rotation with Band Strengthening](#)
3. [Row with Resistance Band](#)
4. [Towel/Hand-assisted Internal Rotation Stretch](#)
5. [Side lying Internal Rotation Stretch at 70 and 90 Degrees](#)
6. [Cross-Body Stretch](#)
7. Water (pool) therapy Standing in water with float under arm, lower body into water to help stretch into flexion (do we have any pictures or video we might insert here from the internet)
8. Standing in water with float under arm, lower body to side to help with external rotation

Phase IV Advanced strengthening phase (week 13- 22):

At 16 weeks after surgery your surgeon may ask you to have a CT scan in order to determine that the bone block has healed. If so, you will be permitted to return to skill sports including racquet, club, and overhead activities. Contact and collision activities should be avoided if possible but at least beyond 8 months after surgery in order to allow for solid healing of the bone graft.

Goals:

- Return of full motion
- Advance conditioning exercises for shoulder function
- Improve muscular strength, power, and endurance (light weights)
- Gradual return to full functional activities

Exercises and online videos:

- [Side-lying External Rotation with Towel](#)
- [Full Can in the Scapular Plane](#)
- [Prone Scaption](#)
- [Diagonal](#)
- [Dynamic Hug](#)



- [Internal Rotation at 90 Degrees Abduction](#)
- [Forward Band Punch](#)
- [Sitting Supported External Rotation at 90 Degrees](#)
- [Standing Unsupported External Rotation at 90 Degrees](#)
- [Biceps Curl](#)

Phase V – Return to activity phase (week 24):

Goals:

- Return to strenuous work activities
- Return to recreational sports
- Return to competitive sports