

Superior Glenohumeral Capsular Reconstruction

Individual patient circumstances may affect the guideline
(tear configuration, fixation used, associated procedures, etc.)

Phase	Goals	Precautions/Restrictions	Treatment
Weeks 0-6	<ul style="list-style-type: none"> • Protect surgical site • Reduce muscle atrophy • Reduce swelling • Decrease pain and inflammation 	<ul style="list-style-type: none"> • Avoid shoulder ROM • Wear sling at all times 	<ul style="list-style-type: none"> • PRICE <ul style="list-style-type: none"> ○ Cryotherapy: 5-7 times per day ○ Compression with TubiGrip/TEDS • Hand/wrist/elbow motion only • Pendulums • Grip strengthening
Weeks 6-12	<ul style="list-style-type: none"> • Progress ROM through comfortable passive range • Promote rotator cuff muscle activation <p><i>Any motion requirements?</i></p>	<ul style="list-style-type: none"> • Ween from sling • Avoid AROM/AAROM • Avoid resistance prior to 3 months 	<ul style="list-style-type: none"> • PROM only (within comfortable range) • Hand/wrist/elbow motion • Pendulums • Grip strengthening • Scapular strengthening • Initiate rotator cuff isometrics after week 10
Weeks 12-18	<ul style="list-style-type: none"> • Progress ROM <ul style="list-style-type: none"> ○ Flexion to 120° ○ Abduction to 90° ○ External rotation to 40° • Initiate pain-free shoulder strengthening 	<ul style="list-style-type: none"> • Avoid pain with motion or strengthening exercises 	<ul style="list-style-type: none"> • PROM -> AAROM -> AROM (slowly) <ul style="list-style-type: none"> ○ Ex. Start in supine with flexion -> back propped to 45° -> standing • Initiate AROM at 16 weeks • Continue with rotator cuff isometrics -> isotonic <ul style="list-style-type: none"> ○ Sidelying shoulder ER ○ Sidelying shoulder abduction ○ Supine protraction ○ Prone retraction • Scapular strengthening • Blood flow restriction; if applicable
Weeks 18+	<ul style="list-style-type: none"> • Full ROM in all planes • Achieve strength up to 90% LSI with the rotator cuff 	<ul style="list-style-type: none"> • Avoid pain with motion or strengthening exercises • Avoid full or empty-can exercises • Rest a day between sessions 	<ul style="list-style-type: none"> • Progress AROM as tolerated • Continue RC and scapular strengthening • Prone shoulder strengthening • Continue work-specific activity

This guideline is not meant to be prescriptive but a recommendation to the rehabilitation process. Progress may vary based on specifics of injury and procedure.