

This rehabilitation program is designed to return the individual to their full activities as quickly and safely as possible following a decompression surgery. Modifications to this guideline may be necessary dependent on physician specific instruction or other procedures performed. This evidence-based decompression guideline is criterion-based; time frames and visits in each phase will vary depending on many factors. The therapist may modify the program appropriately depending on the individual's goals for activity following a sub acromial decompression.

This guideline is intended to provide the treating clinician a frame of reference for rehabilitation. It is not intended to substitute clinical judgment regarding the patient's post-operative care based on exam/treatment findings, individual progress, and/or the presence of concomitant procedures or post-operative complications. If the clinician should have questions regarding post-operative progression, they should contact the referring physician.

General Recommendations/Precautions:

- Return to work as soon as restrictions accommodated by the patient's employer.

Phase	Suggested Interventions	Goals/Milestones for Progression
<p>Phase I</p> <p>Weeks 0 – 2</p>	<p><i>Exercises:</i></p> <ol style="list-style-type: none"> 1. Pendulums 2. Pulleys – flexion and abduction 3. Active wrist and elbow ROM 4. Cane exercises – AAROM 5. Sub-max isometrics 6. Rhythmic stabilization exercises (internal/external rotation, flexion/extension) <p><i>Modalities:</i></p> <ol style="list-style-type: none"> 1. Cryotherapy for pain and swelling 2. Manual for pain and muscle relaxation as well as normalized cervical and thoracic segmental mobility 	<p><i>Goals of Phase:</i></p> <ol style="list-style-type: none"> 1. Re-establish non-painful range of motion 2. Prevent muscular atrophy 3. Wean from sling 4. Decrease pain and inflammation 5. Improve postural awareness 6. Independent with ADL's <p><i>Criteria to Advance to Next Phase:</i></p> <ol style="list-style-type: none"> 1. Sutures are removed 2. Full PROM 3. 4/5 MMT arm at side with internal and external rotation

<p>Phase II</p> <p>Weeks 2 – 6</p>	<p><i>Exercises:</i></p> <ol style="list-style-type: none"> Isotonic strengthening program <ul style="list-style-type: none"> -Prone rowing, shoulder elevation, prone horizontal abduction, prone extension to neutral -Side lying external rotation, side lying abduction to 90 degrees -Advance above exercises with dumbbells and thera band -Initiate upper extremity endurance exercises Strengthen scapulo-thoracic musculature-isometric, isotonic, PNF <p><i>Modalities:</i></p> <ol style="list-style-type: none"> Continue with cryotherapy and manual Rx for pain and swelling control as needed Scar massage/mobility to ensure appropriate tissue healing 	<p><i>Goals of Phase:</i></p> <ol style="list-style-type: none"> Regain and improve muscle strength Normalize arthrokinematics Improve neuromuscular control of shoulder complex <p><i>Criteria to Advance to Next Phase:</i></p> <ol style="list-style-type: none"> Full, pain-free AROM No pain or tenderness on exam
<p>Phase III</p> <p>Weeks 6 and beyond</p>	<p><i>Focus of Phase:</i></p> <ul style="list-style-type: none"> High speed, high energy strengthening Eccentric Exercise Diagonal Patterns Workplace Ergonomics/Work Hardening <p><i>Exercise:</i></p> <ol style="list-style-type: none"> Continue dumbbell strengthening of rotator cuff and deltoids Thera band exercises for scapulo-thoracic musculature and biceps <ol style="list-style-type: none"> 90/90 position for ER/IR with slow/fast sets Plyometrics for rotator cuff <ul style="list-style-type: none"> - 2 handed: chest pass, side to side throws - 1 handed: Wall dribbles, shovel and baseball throws PNF Continued endurance exercises 	<p><i>Goals of Phase:</i></p> <ol style="list-style-type: none"> Improve strength, power and endurance Progressively increase activities to prepare for full functional return Patient will return to advanced functional activities