



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
Phase I	Exercises: 1. Pendulums	Goals of Phase:  1. Re-establish non-painful range of
Weeks 0 – 2	<ol> <li>Pulleys – flexion and abduction</li> <li>Active wrist and elbow ROM</li> <li>Cane exercises – AAROM</li> <li>Sub-max isometrics</li> <li>Rhythmic stabilization exercises (internal/external rotation, flexion/extension)</li> </ol>	motion 2. Prevent muscular atrophy 3. Wean from sling 4. Decrease pain and inflammation 5. Improve postural awareness 6. Independent with ADL's
	Modalities:  1. Cryotherapy for pain and swelling  2. Manual for pain and muscle relaxation as well as normalized cervical and thoracic segmental mobility	Criteria to Advance to Next Phase: 1. Sutures are removed 2. Near Full PROM 3. 4/5 MMT arm at side with internal and external rotation



## ARTHROSCOPIC SUBACROMIAL DECOMPRESSION GUIDELINE Orthopedics

Phase II	Exercises:	Goals of Phase:
Weeks 2 – 6	1. Isotonic strengthening program -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 2. Strengthen scapulo-thoracic musculature-isometric, isotonic, PNF  Modalities:  1. Continue with cryotherapy and manual Rx for pain and swelling control as needed 2. Scar massage/mobility to ensure appropriate tissue healing	<ol> <li>Regain and improve muscle strength</li> <li>Normalize arthrokinematics</li> <li>Improve neuromuscular control of shoulder complex</li> <li>Criteria to Advance to Next Phase:         <ol> <li>Full pain free AROM</li> <li>No pain or tenderness on exam</li> </ol> </li> </ol>
Phase III  Weeks 6 and beyond	Exercise:  1. Continue dumbbell strengthening of rotator cuff and deltoids  2. Thera band exercises for scapulo-thoracic musculature and biceps  3. Plyometric ex for rotator cuff  - 2 handed: chest pass, side to side throws  - 1 handed: Wall dribbles, shovel and baseball	Goals of Phase:  1. Improve strength, power and endurance 2. Progressively increase activities to prepare for full functional return 3. Patient will return to advanced functional activities
	throws 4. PNF 5. Continued endurance exercises	