



Anterior Glenoid Reconstruction

Phase 0 – Immediate Post-Surgical (Week 1-3)

Goals:

- Protect surgical repair
- Decrease pain & inflammation
- Enhance scapular function

Precautions:

- Postoperative immobilizer for 4 weeks
- Brace to be worn at all times (even when sleeping) with the exception of exercise activity and bathing
- Avoid abduction & external rotation activity (to avoid anterior-inferior capsule stress)
- No Passive Range of Motion (PROM) or Active Range of Motion of shoulder (AROM)
- No weight bearing with operative shoulder (no lifting)

Week 1-2

- Sling at all times except showering
- Sleep with sling
- Shower with operative arm held at the side
- Elbow, hand and wrist motion only
- Normalize scapular position, mobility and stability
- Ball squeezes
- Cryotherapy for pain and inflammation

Week 3

- Continue sling wear
- Begin isometrics

Phase I – Immediate Post-Surgical (Week 4-6)

Goals:

- Gradually restore PROM of shoulder
- Do no overstress healing tissue

Precautions:

- Follow surgeon's specific ROM restrictions (dictated in operative note)
- No AROM or weight bearing

Criteria for progression to the next phase:

- Full flexion and internal rotation PROM
- PROM 30 degrees of external rotation at the side
- Can begin gentle external rotation stretching in the 90/90 position

Week 4-6

- Discontinue sling at 4 weeks
- Pendulums
- Gentle PROM



- Full flexion and elevation in the plane of the scapula
- Full internal rotation
- External rotation to 30 degrees at 20 degrees of abduction
- External rotation to 30 degrees at 90 degrees of abduction
- Submaximal, pain-free rotator cuff isometrics in neutral

Phase II – Protection (Week 7-8)

Goals:

- Gradually increase passive and active external rotation
- Independence with ADLs
- Enhance strength and endurance

Precautions

- No aggressive ROM or stretching
- No lifting with affected arm
- No strengthening activities that place significant stress across the shoulder in an abducted position with external rotation (i.e. push-ups, pectoralis flies, ect.)

Week 7-8

- Gentle PROM, external rotation to 30-50 degrees at 20 degrees of abduction, to 45 degrees at 90 degrees of abduction
- Begin AROM and progress to full AROM in gravity resisted positions
- Begin implementation of more aggressive posterior capsular stretching
 - Cross arm stretch
 - Sleeper stretch
 - Posterior/Inferior glenohumeral joint mobilization
- Enhance pectoralis minor length
- Scapular retraction strengthening
- Begin gentle isotonic and rhythmic stabilization techniques for rotator cuff strengthening (open and closed chain)

Phase III – Intermediate Phase (Week 8-12)

Goals:

- Full, nonpainful ROM
- Normalize arthrokinematics
- Improve neuromuscular control

Precautions:

- Do no stress the anterior capsule with aggressive overhead strengthening
- Avoid contact sports/activities

Week 8-9

- Gentle self-capsular stretches as needed/indicated
- Gentle Joint Mobilization (Grades I-II) to Reestablish Normal Arthrokinematics
 - Scapulothoracic joint
 - GH joint (avoid posterior glides)



- SC joint
- AC joint

Week 10-12

- Initiate theraband for internal and external rotation at 0° abduction (IR later in the phase)
- Initiate isotonic dumbbell program
 - Shoulder abduction
 - Shoulder flexion
 - Latissimus dorsi
 - Rhomboids
 - Biceps curl
 - Triceps kick-out over table
 - Push-ups into wall (serratus anterior)

Phase IV –Strengthening (Week 13-20)

Goals:

- Enhance strength, power, and endurance
- Enhance neuromuscular control
- Emphasize
 - High-speed/high-energy strengthening exercises
 - Eccentric training
 - Diagonal patterns

Criteria for progression to Phase V

- Full, nonpainful ROM
- No complaints of pain/tenderness
- Strength 70% of contralateral side

Week 13-16

- Continue internal and external rotation theraband exercises at 0° abduction (arm at side)
- Theraband for rhomboids
- Theraband for latissimus dorsi
- Theraband for a biceps and triceps
- Continue dumbbell exercises for supraspinatus and deltoid
- Progressive serratus anterior push-up-anterior flexion
- Continue trunk and lower extremity strengthening and conditioning exercises
- Continue self-capsular stretches

Week 17-20

- Isotonic shoulder strengthening exercises isolating the rotator cuff-including sidelying external rotation, prone arm raises at 0, 90 & 120°, prone external rotation, and internal rotation at 0 & 90°; progress to standing strengthening exercise once able to tolerate resistance against gravity without substitution
- Progress scapulothoracic/upper back musculature strengthening exercises
- Dynamic stabilization exercises
- Proprioceptive Neuromuscular Facilitation (PNF) exercises



Phase V – Return to Full Activity (Week 21+)

Goals:

- Progressively increase activities to prepare patient for unrestricted functional return

Week 21+

- Continue theraband, and dumbbell exercises outlined in phase 3
- Continue ROM exercises
- Continue strengthening exercises for scapular and rotator cuff muscles
- Progress to functional activities needed for ADL's and sport

Criteria to Return to Sport

- Surgeon clearance
- Pain free shoulder function
- Adequate active and passive range of motion necessary for required sport/activity
- Greater than 90% strength as compared to the non-operative shoulder