

Rehabilitation Protocol: Adhesive Capsulitis

Name: _____

Date: _____

Diagnosis: _____

Date of Surgery: _____

Post-Op Week 1-8
ROM

- Aggressive passive ROM
- Begin with forward flexion, external rotation and internal rotation with the elbow at 90° and the arm at the side.
- Rotation may also be performed with arm in the slightly abducted position.
- Home exercise/stretching program to be performed by the patient 3-5x per day.
- Sustained stretch of 15-30 seconds should end every ROM routine
- Anterior and posterior capsular stretches.
- **No restriction on ROM, but te patient and therapist must communicate to avoid injuries.** If it is felt that progress is not being made, please call Dr. Jazrawi.

Strength

- Gentle strengthening of rotator cuff and scapular stabilizers may be done, but focus should be on ROM

Brace

- No shoulder brace

Modalities

- Ultrasound as needed
- Moist heat prior to therapy
- Ice for 15-20 minutes after therapy

Medications

- Improving ROM in the setting of adhesive capsulitis may be **painful**. To facilitate therapy, you may be prescribed a pain medication to be taken before every therapy visit.

Goals of phase:

- Improve shoulder discomfort
- See noticeable gain in shoulder motion

Post-Op Week 8-16
ROM

- Continue PROM, AROM, AAROM
- Exercises

	<u>Goal</u>
Forward flexion	0-140°
External rotation	0-45°
Internal rotation	T12
- Continue capsular stretches

Strength

- Rotator cuff strengthening in all planes 3x/week
- Start with isometric strengthening
- Progress to Theraband strengthening
- Progress to dumbbells
- Scapular stabilization program

Modalities

- As needed



Sports Medicine
Center for Musculoskeletal Care
333 East 38th Street
New York, NY 10016
Tel: (646) 501-7223

- Moist heat prior to therapy
- Ice 15-20 minutes after therapy

Goals of phase:

- Achieve normal or near-normal ROM
- Control pain
- Successful participation in activities of daily living

Protocol Modifications:

Comments:

Frequency: _____ **times per week**

Duration: _____ **weeks**

Signature: _____

Date: _____