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## LATARJET PROCEDURE REHABILITATION PROTOCOL

| Phase | Restrictions | Therapeutic Exercises |
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| Phase 1: Weeks 0-2<br><br>Goals: Reduce swelling and edema, minimize pain, retard muscle atrophy, protect the surgical repair, and avoid shoulder stiffness | -Simple sling to be worn at all times except PT, dressing, and hygiene<br>-No lifting greater than 3lbs with the affected arm<br>-No strengthening | -Passive range of motion 0-90 degrees flexion, 0-90 degrees abduction, and external rotation to neutral<br>-Unrestricted elbow, wrist, and hand range of motion with the arm at the side<br>-Wall slides, pendulums<br>-Scapular Retraction in sling<br>-Cervical stretching and range of motion<br>-Modalities PRN |
| Phase 2: Weeks 3-6<br><br>Goals: Progress range of motion, minimize pain, retard muscle atrophy, protect the repair, and begin neuromuscular control | -Simple sling to be worn at all times except PT, dressing, and hygiene<br>-No lifting greater than 3lbs with the affected arm | -Progress to full passive range of motion in all planes<br>-Unrestricted elbow, wrist, and hand range of motion with the arm at the side<br>-Wall slides, pendulums<br>-Scapular Retraction in sling<br>-Cervical stretching and range of motion<br>-Continue previous exercises<br>-Initiate scapular strengthening<br>-UBE NO resistance<br>-Scar tissue mobilizations as needed<br>-Modalities PRN |
| Phase 3: Weeks 7-12<br><br>Goals: Full range of motion, minimal pain, begin muscular activation and strengthening, protect the repair | -Wean from simple sling<br>-No aggressive range of motion or stretching<br>-No lifting greater than 10lbs<br>-Do not stress the anterior capsule with aggressive overhead strengthening | -Progress to full passive range of motion in all planes<br>-Once full PROM is achieved, begin AROM and progress to full AROM in gravity resisted positions<br>-Begin posterior capsular stretching: cross arm stretch, side lying IR stretch, posterior/inferior glenohumeral joint mobilization<br>-Enhance pectoralis minor strength<br>-Scapular retractor strengthening<br>-Begin gentle isotonic and rhythmic stabilization techniques for rotator cuff musculature (open and closed chain strengthening)<br>Weeks 8-10:<br>-Progress previous strengthening program |

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| Phase 4: Weeks 13-20<br><br>Goals: Progression of functional activities, advanced sport, and recreational activity per surgeon | -No heavy strengthening or weightlifting until 4 months<br>-No throwing or overhead activity movements until 4 months<br>-Gradual return to strenuous work activities<br>-Gradual return to recreational activities<br>-Gradual return to sports activities<br><br>**Criteria for Discharge:**<br>**-Surgeon clearance**<br>**-<10% strength deficit**<br>**-Limb similarity index of 90% or greater**<br>**-45/50 on biomechanical functional tests (if performed)**<br>**-NO pain or complaints of instability** | -Continue all strengthening exercises<br>-Maintain full range of motion<br>-External rotation strengthening<br>-Periscapular T's & Y's<br>-Progressive ball stabilization on the wall, and wall ball dribbles<br>-Begin generalized upper extremity weightlifting with low weight, and high repetitions, being sure to follow weightlifting precautions: avoid wide grip bench press, no military press or lat pull behind the head<br>Week 16:<br>-Initiate interval sports program if appropriate |