

# Arthroscopic Shoulder Debridement

Labrum, Rotator Cuff, Chondroplasty, Synovectomy, Removal loose/foreign body, Subacromial Decompression

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## Pre-operative Rehabilitation

GOAL: Optimize medical and physical conditions to maximize likelihood of achieving operative goals. Review post-operative protocol/restrictions and address any concerns about living environment/ADL's. The patient and surgeon should have similar goals and expectations relative to the surgery and the expected outcomes. Focus rehab to restore full ROM to avoid post-operative stiffness.

## Postoperative rehabilitation

GOAL: Restore range of motion and strength, such that function is optimized to achieve surgeon and patient goals. Range of motion and strength often dictate functional outcome. Eliminate (or minimize) pain depending on the clinical situation. The ranges below are indicative of differences in recovery times as determined by factors such as age, activity level, medical conditions, conditioning, and tissue quality. The intent is to rehab as aggressively as possible while allowing for proper healing of the surgically treated tissue.

### PHASE I: Weeks 1-4

- 1) Immediate post-operative PT visit: educate patients on precautions, review swelling and pain management, check wound, wean out of sling
- 2) ROM: no restrictions
  - a. Start with PROM → AAROM → AROM as tolerated
  - b. Pulleys, Tbar, wall walks
- 3) Exercises/therapy activities
  - a. Elbow/wrist/hand ROM
  - b. Scapular stability exercises: clocks, retraction, prone rows/ext/horizontal abd
  - c. Cervical Flexibility
- 4) Progress into light resistance training as ROM normalizes focused on rotator cuff stabilization with good glenohumeral control
- 5) GOAL: full ROM, minimal pain, good scapulothoracic mechanics
  - a. If the patient does not have full AROM by 1 month post op, (s)he is behind

### PHASE II: Weeks 4-8

- 1) Continue to normalize scapulohumeral rhythm, neuromuscular control and strength with goal of full AROM
  - a. CKC with gradually increasing weight through the involved arm
  - b. Progressive resistance TheraBand or free weights → advance to 90° as appropriate
- 2) Cardio: bike, elliptical, treadmill walking
- 3) Resistance/Strength for entire upper chain including core exercises

### **PHASE III: Weeks 8-12**

- 1) GOAL: progressive, consist strengthening with good mechanics
- 2) Initiated sport specific activities
- 3) Continue progressive strengthening

**Return to functional goals:** i.e. sport/work: Upon completion of proper rehab you'll be cleared to return to sport. This may require a functional evaluation by the therapist which will aid the surgeon in determining the appropriate timing. This should be consistent with the preoperative discussions, but are often variable. Please make sure you understand the process for return to sport which will almost always involve a gradual progression. **For young athletes with minimal articular cartilage injury, the protocol can be significantly expedited**