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Therapist Information and Guidelines

Posterior Shoulder Stabilisation

Post Op

Day 1 - 4 Weeks

External rotation brace or sling in situ, normally for 4 weeks.
Finger, wrist and R/U joint exercises.
Elbow Flex / Ext in standing.
Teach postural awareness and scapular setting.
Passive flexion, as comfortable to 60°.
Core stability exercises with sling (as appropriate).

No combined forward flexion and internal rotation exercises

4 Weeks

Brace/sling removed.
Gentle pendular exercises.
Commence active assisted flexion, external rotation and internal rotation as comfortable.
Active assisted abduction to 60°.
Progress to active ROM exercises as able.
Commence proprioceptive exercises (minimal weight bearing below 90°).

No combined forward flexion and internal rotation exercises

6 -12 Weeks

Aims of physiotherapy

Regain scapular and glenohumeral stability working for shoulder joint control rather than range.
Gradually increase range of movement.
Strengthen the rotator cuff muscles.
Increase proprioception through open and closed chain exercises.
Progress core stability exercises.
After 2 months any residual tightness to internal rotation may be addressed by specific stretching exercises.

Return to Functional Activities

These are approximate guidelines only as each patient will progress at a different rate. These should be seen as the earliest that these activities may commence.

Driving: 6-8 Weeks

Swimming: Breaststroke 6 weeks

Freestyle 12 weeks

Golf: 3 months

Lifting: Light lifting 3 weeks

Heavy lifting Avoid for 3 months

Return to work: Sedentary job as tolerated

Manual job 3 Months

Contact sports: 6 months

sports including horse riding, rugby, football, martial arts, racquet sports and rock climbing.

Should be guided by Mr McKeown.