

- 6 weeks post-op- please power of internal & external rotation & abduction (i.e. theraband), proprioceptive work & scapular exercises.

Knee arthroscopy- post op or for patello- femoral conditions

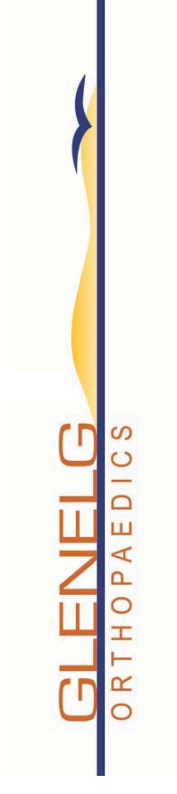
quadriceps/hamstring co contraction exercises, VMO exercises and patella tracking as well as anti inflammatory measures.

SHOULDER TENDINOPATHY/ CUFF TEAR

External Rotation exercises with theraband working with arm adducted with theraband in a painless fashion at 40% maximum ER strength.

posterior capsule stretching (internal rotation up back)

If massive cuff tear, then deltoid retraining- working on anterior fibres



Protocols

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ARTHROSCOPIC CUFF REPAIR

- POST OP gentle pendular exercises, 15° elbow flex/extension across chest to groin and supination/pronation wrist motion.
- 6 weeks from surgery sling can be removed and passive motion can be commenced with passive assisted flex/ext abduction and ER slow increasing, so that 10 weeks from surgery patient has full motion- use of pulleys and broomsticks +/- hydrotherapy useful
- after full motion obtained gentle ER/IR exercises with theraband can commence.

ARTHROSCOPIC SHOULDER DECOMPRESSION +/- ac joint excision +/- biceps tenotomy

- immediately anti-inflammatory measures as well as increasing ROM., encouraging full ROM as soon as possible and then strengthening can be commenced in a gentle fashion.
- If symptoms not improving after 3 months despite full motion, stop physio as may be not allowing cuff to recover
- Hydrotherapy useful for recalcitrant stiffness

Proximal Biceps Tendon Repair/ tenodesis

As per arthroscopic decompression, but arm in sling to prevent extension past 90 degrees flexion initially then 45 degrees flexion at 4 weeks.

OPEN or arthroscopic SHOULDER STABILISATION

- POST-OP gentle pendular exercises 15°, elbow flex/extension across chest to groin & supination/pronation wrist motion.

- 6 WEEKS POST-OP the sling can be removed and full motion commenced, avoiding external rotation past neutral or any er combined with abduction
- 10 WEEKS POST-OP full motion but avoiding abducted external position. In addition jogging but no sprinting on a flat surface.
- 3 MONTHS POST-OP theraband strengthening can commence & aggressive stationary bike riding.
- 4 MONTHS POST-OP light weight training but avoiding any that can cause the abducted external position & chin ups.
- 5 MONTHS POST-OP full weights
- 5½ MONTHS POST-OP ball skills can commence.
- 6 MONTHS POST-OP all full activities can be introduced but strapping is recommended for all training & games.

TOTAL SHOULDER REPLACEMENT

- Post-operatively elbow, neck and hand ROM, shoulder pendular & girdle exercises.
- 2 weeks post-op -assisted elevation (i.e. stick, pulley) plus internal & external rotation exercises - avoiding external rotation past neutral. In addition start to wean from sling.
- 3 weeks post op, the sling should be abandoned. Therapeutic assisted abduction ?therapist or auto assistance & isometric rotator cuff strengthening within limits of pain can commence.