SHOULDER PREHABILITATION PROTOCOL

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ORTHOPAEDIC SHOULDER SURGEON
Shoulder exercises may be mildly uncomfortable, however should be gentle and not cause significant pain.

Stop any exercise that causes excessive or prolonged pain. Talk to your physiotherapist if you have any pain while exercising.

Gentle physiotherapy led hydrotherapy is permitted with respect to the guidelines below.

<table>
<thead>
<tr>
<th>GOALS</th>
<th>WHEN DO I START</th>
<th>DO NOT:</th>
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<tbody>
<tr>
<td>Improve shoulder posture</td>
<td>As soon as possible</td>
<td>Overstrain your shoulder</td>
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<td>Improve shoulder mobility</td>
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<td>Over-use your shoulder</td>
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<td>Improve shoulder strength</td>
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<td>Lift heavy loads</td>
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<td>Pain-free exercises</td>
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<td>Move into painful extremes</td>
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<td>Improve subacromial space</td>
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**PHYSIOTHERAPY EXERCISES TO ADDRESS:**

**POSTURE**
- Scapular posture assessment to correct forward shoulder posture
- Scapular setting to optimise subacromial space; improve scapular upwards rotation, external rotation, and posterior tilt
- Cervical posture correction and optimisation
- Kinematic posture correction and optimisation

**RANGE OF MOVEMENT**
- Gentle cervical range of movement stretches (i.e. retraction, lateral flexion, rotation)
- Gentle scapulothoracic mobility
- Passive elevation to 90 degrees (i.e. pendular)
- Passive internal and external rotation
- Shoulder horizontal flexion

**STRENGTH**
- Scapular retraction; concentric and eccentric
- Shoulder extension to strengthen middle and lower trapezius i.e shoulder squeeze, standing row (+/- theraband)
- Shoulder external rotation in pain free adduction position to strengthen infraspinatus, teres minor and deltoid (+/- theraband)
- Shoulder internal rotation to strengthen pectoralis and subscapularis (+/- theraband)
- Shoulder horizontal abduction to strengthen middle and lower trapezius, infraspinatus, teres minor, posterior deltoid
- Elbow flexion to strengthen biceps and elbow extension to strengthen triceps