



SHOULDER PREHABILITATION PROTOCOL

MR DEVINDER GAREWAL

MBBS (Melb), BMedSci, FRACS (Ortho), FAOrthA

ORTHOPAEDIC SHOULDER SURGEON

WARRINGAL MEDICAL CENTRE SUITE 9, 214 BURGUNDY STREET HEIDELBERG, VIC 3084

TEL: 1300 ARMCLINIC | 1300 276 254 EMAIL: ADMIN@MELBOURNEARMCLINIC.COM

WWW.MELBOURNEARMCLINIC.COM



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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.

GOALS	WHEN DO I START	DO NOT:
<ul style="list-style-type: none"> Improve shoulder posture Improve shoulder mobility Improve shoulder strength Pain-free exercises Improve subacromial space 	<p>As soon as possible</p>	<ul style="list-style-type: none"> Overstrain your shoulder Over-use your shoulder Lift heavy loads Move into painful extremes

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