



SHOULDER PAIN NON-OPERATIVE REHABILITATION GUIDELINES

General notes:

This is a guideline for generalized shoulder pain which can be the result of poor postural awareness, overuse, and/or an imbalance in muscle strength and flexibility. For those who have sustained a shoulder dislocation or subluxation event, please refer to the **Shoulder Instability Guideline**.

All phases and exercises are to serve as guidelines. Progression through these guidelines should be based upon criteria and will vary depending on each individual patient. Exercise suggestions are merely suggestions, and are not appropriate for every patient.

Return to sport is based on input from team of providers (physician, physician assistant, athletic trainer and/or physical therapist) & appropriate testing.

The following factors should provoke communication with or referral back to the treating physician:

- Parasthesias (numbness or tingling, burning sensation) into involved limb
- Further loss of range of motion (ROM)
- Increased pain
- Shoulder subluxation and/or dislocation
- Inability to progress if pain exists

Phase I: Initial Phase

Sling:

- Sling as *prescribed by medical provider*

ROM (Range of motion):

- Progress with physical therapist & with a home exercise program (HEP) until functional ROM is achieved

Therapeutic Exercises:

- Early focus on achieving proper posture & scapular (shoulder blade) awareness
 - Emphasis on neuromuscular re-education of peri-scapular muscles with both verbal & tactile cuing for proper mechanics
 - Begin with isometric (minimal motion) exercises
 - Prone W, T, I
 - Progress to isotonic (exercises with joint motion) if pain-free
 - Mid row, low row, theraband wall walks & theraband wall clocks
- Early focus on improving core & hip strength and stability
 - Bridging, planks, lateral band walks

Manual therapy:

- Appropriate joint & soft tissue mobilizations as needed to shoulder /scapula / thoracic spine to address restrictions and create smooth and symmetric motion

Cardio:

- Stationary bicycle & elliptical trainer as tolerated

Modalities:

- Cryotherapy (ice pack or ice massage) as needed
- Electrical stimulation as needed for pain control

Progression to Phase II:

- *Reduction or improvement in pain levels with daily activity*
- *Improving functional ROM of shoulder joint*



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Phase II: Intermediate Phase

Sling:

- Continue with sling use as *prescribed by medical provider*

ROM:

- Progress to full shoulder ROM

Therapeutic Exercises:

- Begin to advance peri-scapular strengthening exercises to include weight-bearing exercises if tolerated
 - Push up with a plus, alternating shoulder taps
- Progress core & hip strength and stability exercises
 - Physioball walk outs, planks with lower extremity motion (hip abduction or hip extension)
- Begin to initiate rotator cuff strengthening with focus on proper mechanics
 - Progress from isometric exercises (minimal shoulder motion) to isotonic exercises (shoulder going through a motion)
 - 6 way isometrics → 6 way theraband, diagonal PNF patterns, 90/90 rotator cuff strengthening

Manual Therapy:

- Continue with appropriate joint & soft tissue mobilizations as needed to shoulder / scapula / thoracic spine to address restrictions and create smooth and symmetric motion

Cardio:

- Initiate UBE (upper body ergometer) with increasing resistance as tolerated
- Initiate treadmill jogging as tolerated
- Initiate swimming as tolerated (using kickboard if needed)

Modalities:

- Cryotherapy (ice pack or ice massage) as needed

Progression to Phase III:

- *Reduction or improvement in pain levels with daily activity*
- *Good neuromuscular control with all scapular strengthening exercises*
- *Good tolerance to initiation of rotator cuff specific exercises in Phase II*

Phase III: Advanced Phase

Therapeutic Exercises:

- Patient to continue all core / hip / shoulder / scapular strengthening exercises with HEP

Cardio:

- Running
- Sprinting
- Sport – specific conditioning

Plyometrics:

- Sport-specific activities
 - Sport specific drills such as throwing, hitting and tennis / volleyball serving

Modalities:

- Cryotherapy (ice pack or ice massage) as needed