



Isolated Subscapularis Repair REHAB Protocol

Weeks 1-4: Rest and healing

Sling immobilizer: At all times except exercise

HEP: Distal ROM with scapular retraction
Manual scapular manipulation
Supine passive FF in scapular plane to 100
Supine passive ER to 0

Weeks 4-6: Protective/Early motion phase

Sling Immobilizer: At all times except exercises, remove after 6 weeks

PROM: FF in scapular plane – no limits
ER to 20 degrees
IR to 30 degrees

Therapeutic exercises: Codmans, wand exercises

Strengthening: RTC isometrics with arm in 0 abduction and neutral rotation
Scapular stabilization, no resistance
Abdominal and trunk exercises

Weeks 7-12: Early Strengthening Phase

PROM/AAROM: FF/ER/IR – full, go slow with ER

Therapeutic exercises: Continue wand exercises for ER/IR/FF
Flexibility, horizontal adduction (post capsule stretching)

Strengthening: RTC isotonic strengthening exercises
AROM: side-lying ER and supine in scapular plane
Progress to standing FF
ER/IR @ modified neutral with elastic bands
Progress to rhythmic stabilization exercises
Progress to closed chain exercises

Weeks 7-12: Early Strengthening Phase

Progress isotonic strengthening: periscapular and RTC musculature
Lat pull downs
Row machine
Chest press

Flexibility: side lying post capsule stretch

Progress scapular stabilization program

Initiate isokinetic strengthening (IR/ER) in scapular plane

Begin light plyometrics at 16-18 weeks

Individualize program to meet demands of sport specific requirements at 20-24 weeks
Initiate throwing program for overhead athletes at 20-24 weeks