

Manipulation Under Anesthesia Arthroscopic Release Steadman Hawkins Protocol

*Sling for comfort – discard within several days

*Advance rehab as tolerated – no pain, no gain

*CPM ordered for hospital & home use – for immediate use – 1 hour AM & PM to increase motion

*Inpatient therapy: Begin in recovery room (3-4x/day for LOS)

Aggressive stretch in all planes per orders, stabilize GH joint due to

anesthesia/decreased motor control

*Outpatient therapy: 5x/week for 2 weeks, progress to 2-3x/week as needed

<u>Phase 1 – PASSIVE</u> Pendulums to warm-up

Passive ROM and terminal stretching

Week 1-3 Supine → Seated External Rotation – Full

Supine→Seated Forward Elevation - Full

Internal rotation – Full (with towel) Cross body horizontal adduction

Sleeper stretch

<u>Phase 2 – ACTIVE</u> Pendulums to warm-up

Active ROM with terminal stretch

Week 4-6 Progress when PROM allows

Phase 3 – RESISTEDPendulums to warm-up and continue with phase 2

Week 10-12 Progress when AROM allows

External and Internal Rotation

Standing forward punch

Seated Rows/Shoulder Shrugs

Bicep Curls/Bear Hugs

Weight Training

Per PT discretion Keep hands within eyesight, keep elbows bent, no long lever arms

Minimize overhead activities (below shoulder)

(No military press, pull-down behind head, or wide grip bench)

Return to Activities

Computer 1-2 weeks
Recreational Sports 2-3 months

Other activities per surgeon/PT discretion