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PATIENT NAME:

PROCEDURE:

DATE OF SURGERY:

PHYSICAL THERAPY ORDER – Subacromial Balloon Spacer

General Guidelines:

Patient is counseled to avoid: quick sudden movements, repetitive movements, lifting of any weight and avoiding any activity that requires force or power. Driving is not recommended until such time as the patient can safely get both hands on the steering wheel and operate the vehicle safely.

Phase I: 0-2 weeks

Immediately after operation the affected hand should be positioned in a sling. The patient can remove the sling for short periods while at home but must not remove the sling while getting out or while sleeping in order to avoid any inappropriate movements.

Passive and active assisted shoulder blade, neck, elbow, forearm, wrist and digits exercises and mobilization to avoid stiffness and minimize edema at the elbow and hand.

Forward flexion and abduction are limited to no more than 60°, or less if pain is involved.

Phase II: 2-6 weeks

Active work with physical therapist: usually starts at 1-3 weeks and lasts up till about 6-10 weeks post op.

Sling/immobilizer may discontinue unless needed for comfort reasons (mainly recommended while sleeping and at outdoor activities).

Patients are encouraged and instructed in daily home stretches to assist therapist in achieving functional ROM. Active assistive ROM with gentle passive assist by therapist to improve ROM and function (therapist manually guides patient through range of motion with slow steady stretching). Strengthening begins lightly and increases over time (no power activity for at least 3 months post op)

Phase III: 6-12 weeks (may continue through 6 months, until back to normal)

Patient is expected to regain their ROM to prior to surgery level or at least making steady gains on a weekly basis, otherwise, should be referred to the surgeon for further consultation.