# **Altru Advanced Orthopedics**

## **Shoulder Impingement/Bursitis Non-Surgical Protocol**

The intent of this protocol is to provide the therapist with general guidelines for initiation and progression of rehabilitation for a non-surgical patient with shoulder impingement/bursitis. It is not intended to be a substitute for appropriate clinical decision making regarding the progression of a patient's rehab. The actual therapy plan of care must be based on the mechanism of injury, physical exam and findings, individual progress, and any complications and/or co-morbidities. If a therapist needs assistance or has questions regarding the progression of a patient they should consult the referring medical provider.

#### **General Guidelines:**

- Control pain and edema
- Return to normal ROM, proprioception, strength
- Return to normal ADLs/sport/work activities

## PHASE I: Acute

#### Goals:

- Decrease pain and inflammation, and edema
- Regain full PROM
- Patient education, instruct in HEP

#### **Therapeutic Exercise:**

- 1. PROM:
  - Pendulum exercises
  - o PROM
  - AAROM (limit overhead ROM)
    - Pulley: flexion, sitting or standing
    - Wand/cane: flexion with neutral ER and IR/ER with elbow at side
- 2. Isometric strengthening- submax and painfree
  - RTC and scapula
- 3. Suggested Stretches:
  - Sleeper, towel IR
  - Cross body posterior capsule
  - Upper trap
  - Corner/doorway pec
  - Thoracic extension

#### Manual Therapy:

- Joint mobilizations- inferior and posterior glides
- Soft tissue mobilization- especially subscap and pec minor

### **Modalities:**

- Cryotherapy/ice for pain and inflammation, and edema as needed
- IFC/TENS for pain relief as needed

#### **Patient Education:**

- Posture/Scapular retraction and its importance in reducing impingement
- Home exercise instruction
- Activity modification:
  - Avoid any activity that increases symptoms
  - Limit overhead activity
  - Keep activity below 90° and keep all activity within a pain free range if able

#### **Criteria for progression to Phase II:**

- Full, pain free PROM
- Pain score ≤ 2/10 on visual analog scale (VAS)

#### PHASE II: Motion

#### Goals:

- Regain nonpainful ROM
- Increase scapular/RTC strength
- Decrease pain

#### Suggested Guideline:

- Begin with scapular exercises and progress to RTC
- Begin with AAROM and progress to AROM

#### **Therapeutic Exercise:**

- 1. Continue PROM as needed
- 2. AAROM:
  - Pulleys- sitting or standing
  - Cane/wand- flex, scap, abd, ER, IR
- 3. Strengthening:
  - Theraband ex (rows, extension, IR, ER)
  - Sidelying ER with scap setting and IR
  - Prone horiz abd, extension, and rows
  - Scapular strengthening (seat lifts, serratus punches, bent rows)
  - Machine weighted exercise
- 4. Rhythmic stabilization
- 5. Continue stretching

#### Manual Therapy:

• Continue joint mobilization and soft tissue mobilization as needed

#### **Modalities:**

• Continue as needed

#### Criteria for progression to Phase III:

- Full, pain free AROM
- VAS pain score  $\leq 2/10$  with activity
- No tenderness to palpation

#### **PHASE III: Strengthening**

#### Goals:

- Increase RTC strength
- Maintain flexibility and ROM
- Return to normal ADLs, sport and work activities without pain
- Independent in HEP

#### Suggested Guideline:

• Avoid full can or empty can exercises if they are painful

#### **Therapeutic Exercise:**

- 1. ROM
  - Continue AAROM with wand in all planes
  - Continue self-capsular stretches
  - Continue muscle stretches
- 2. Isotonic Dumbbell Strengthening Program
  - Sidelying ER with scap setting and IR
  - Prone horiz abd, extension, rows, add in Y's and W's if tolerated without increased pain
  - Standing flex, scaption with ER, and abd to 90°
- 3. Progress fundamental shoulder exercises
  - PNF patterns
- 4. Closed Chain stabilization exercises- Progress: plantargrade, quadruped, modified pushup/plank position, to full push-up/plank position
- 5. Progress rhythmic stabilization to dynamic stabilization
  - Balance boards, steps working into push-up position
  - Ball UE weight-bearing activity
  - Plank with/without perturbations
- 6. Sport/Work specific exercises/activities

#### Criteria for D/C from therapy:

- Pain-free and full AROM
- Normal strength in shoulder (4-5/5)
- All patient/therapist goals met