



# Superior Capsular Reconstruction (SCR)



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## Physical Therapy Prescription

\*\*\*Please fax progress notes to Advanced Orthopedics & Sports Medicine at 720-895-1121\*\*\*

Name: \_\_\_\_\_

Date of Surgery: \_\_\_\_\_

Diagnosis: R / L Superior Capsular Reconstruction (SCR)

Frequency: 2-3 times per week for \_\_\_\_\_ weeks, Therapy to start 3-5 days after surgery

### Phase I (weeks 0-6)

**ROM:** 0-2 weeks: none  
2-4 weeks: begin PROM  
- Limit: 90° flexion, 45° ER, 20° extension, 45° abduction, 45° ABER

**Brace:** On at all times including sleep  
May remove for hygiene, changing clothing, rehab, and home exercises

**Exercises:** 0-2 weeks: Elbow/wrist ROM, grip strengthening and pendulums at home only  
2-6 weeks: Begin PROM to ER to 45° Codman's, posterior capsule mobilizations;  
avoid stretch of anterior capsule and extension  
Closed chain scapula

### Phase II (weeks 6-12)

**ROM:** Begin AAROM/AROM  
Advance limits: 140° flexion, 135° abduction, 90° ABER, 45° ABIR

**Brace:** May remove

**Exercises:** Continue Phase I work;  
Begin resistive exercises for scapular stabilizers, biceps, triceps and rotator cuff\*\*  
8 weeks: progress from AAROM -> AROM , deltoid/rotator cuff isometrics

### Phase III (weeks 12-16)

**ROM:** Progress to full AROM

**Brace:** None

**Exercises:** Advance activities in Phase II; emphasize external rotation and latissimus eccentrics,  
Glenohumeral stabilization  
12 weeks: Begin muscle endurance activities (upper body ergometer) Cycling/running as tolerated

### Phase IV (months 4-6)

**ROM:** Progress to full and pain-free ROM

**Brace:** None

**Exercises:** Aggressive scapular stabilization and eccentric strengthening  
Scapular retraction and control  
Begin plyometric and throwing/racquet program, continue with endurance activities  
Maintain ROM and flexibility

Signature: \_\_\_\_\_

Date:

Stephen G. Thon, MD

[www.AdvancedOrtho.org](http://www.AdvancedOrtho.org)

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