

Coracoid Transfer (Latarjet)

Rehabilitation Protocol

Dr. Jeffrey R. Jaglowski jagsortho.com

** The following instructions represent general guidelines. Your personal instructions may be slightly different and will be conveyed to you by Dr. Jaglowski if this is the case. Post-operative instructions, physical therapy protocols, and useful information regarding your post-op care may be found electronically at www.jagsortho.com.**

Abbreviations

- ROM range of motion
- PROM passive ROM
- AAROM active assist ROM
- AROM active ROM
- ABD abduction
- ADD adduction
- ER external rotation (PER passive external rotation)
- IR internal rotation
- FE- forward elevation (AFE active forward elevation)

Phase I: 0-6 Weeks Post-op

Range of Motion

- Limit ER to passive 45° to protect subscapularis repair
- FE progress as tolerated

Sling

- <u>0-2 weeks</u>: Worn at all times (day and night)
- Off for gentle exercise only
- <u>2-6 weeks</u>: Worn daytime only

Therapeutic Exercise

- <u>0-3 weeks</u>: Grip strengthening, pendulum exercises
- Elbow/wrist/hand ROM at home
- 3-6 weeks: Begin cuff, deltoid isometrics; limit ER to passive 45°
- No active IR nor extension until 6 weeks

Phase II: 6-12 Weeks Post-op

Range of Motion

- Increase as tolerated to full
- Begin active assisted/active internal rotation and extension as tolerated after 6 weeks

Sling

- None

Therapeutic Exercise

- 6-8 weeks: Begin light resisted ER, forward flexion and abduction
- 8-12 weeks: Begin resisted internal rotation, extension and scapular retraction

Phase III: 12-24 Weeks Post-op

Range of Motion

- Progress to full ROM without discomfort

Sling

- None

Therapeutic Exercise

- Advance strengthening as tolerated
- Closed chain scapular rehab and functional rotator cuff strengthening; focus on anterior deltoid and teres
- Maximize subscapular stabilization