

Shoulder Rehabilitation Post-Regenerative Medicine Treatment

Sean Mulvaney, MD and Britta Nauman, DPT, CMTPT

- First Days Post Treatment
 - **Keep the shoulder in the sling for the prescribed number of days**, which depends on the specific treatment as well as the type and severity of the shoulder injury. (Typically, 2 days minimum to as long as 1 week).
 - It is very important during this time not to use or load the shoulder. This includes opening doors, using the arm to drive and pick up items. The concept here is that the regenerative treatment (PRP, Lipogems, etc.) was precisely placed into the tear or injury site and loading the shoulder during this critical phase may displace the treatment. When muscles or tendons are loaded, they squeeze tightly together: picture wringing out a wet dishcloth (which we want to avoid during this phase).
 - During this time the sling may be carefully adjusted for comfort but should continue to support the forearm. Place additional padding under the sling as needed for comfort. If desired, once or twice a day the sling may be carefully removed to use a wash cloth to clean the arm pit with the arm hanging down.
 - In your sling you may exercise your grip by doing towel squeezes and rolling your wrists around. Roll shoulders and pull shoulder blades down and back for 20- 30 repetitions each, 5 times per day. Perform gentle range of motion for your neck by moving your neck side to side, and forward and backward, 20- 30 repetitions each, 5 times per day. Keep your chin tucked back to ease the stress on your neck.
 - Leave the sling on loosely while sleeping to prevent your arm from flailing during sleep. Position on your back and place a small flat pillow between forearm and trunk to help keep shoulder in a comfortable position. It may help to place a pillow under your knees.

- Once Out of the Sling; for the next 2 to 3 weeks
 - Hanging Arm Circles and figure “8”s
 - Bend forward so the arm hangs free and make a slow easy circular or figure 8 motion with the hanging arm. Start with small circles or figure “8”s and as the shoulder loosens up gradually make larger circles. Do about 15 to 20 circles or figure “8”s clockwise and then counter clockwise. Do these 4 to 6 times a day.
 - Wall Walks
 - Stand closely facing into a wall. Bend the elbow on the affected arm so the palm faces the wall in front of you. Using your middle and index fingers as “legs” slowly walk the hand up the wall. Do not let your hand drift out to the side. The goal is to get the arm fully extended over-head, but this may take a few days to get this range of motion back. The shoulder may be stiff, and this will be uncomfortable, but getting your range of motion back in your shoulder is a critical step in your recovery. Each time walk the hand

- a little higher on the wall. Repeat this same action, but for this variation, stand sideways to the wall with your injured arm facing the wall. Walk the fingers up the wall while pressing the side of your body in the wall. Complete each of these exercises with a 10 second hold at the top for 10 repetitions, 4-6 times a day.
- Table Slides
 - If wall walks are too much for you, you can use this variation until you can do wall walks. Sit against a table, put your hand flat on the table and slide your hand as far forward as you can and lean forward to stretch the shoulder. Do it for the same amount as “wall walks.”
 - “Angel” Floor stretches
 - This is a critical exercise to getting your shoulder better. Lie down on the floor, positioned on back. Place arms on the floor with a right angle bend in your elbows. Allow forearms to gently stretch back to the floor with palms up. Attempt to get elbows and wrists resting on the floor, once you can do this slowly work your arms overhead. Flatten your lower back to the floor to engage core.
 - Start formal shoulder Physical Therapy (PT)
 - You will start shoulder PT at two to three weeks. The initial goals will be to restore proper posture, slowly restore full range of motion to the shoulder, and re-establish scapular control (control of the shoulder blades). Your therapist will prescribe and guide you through strengthening exercise for scapular stability and light rotator cuff strengthening exercises. Some brief (10 minutes or less) period of heat or ice therapy will not hurt the regenerative treatment. Avoid modalities such as any form of laser, electrical stimulation, ultrasound or iontophoresis. Dry needling is fine if needed.
 - During this time, avoid aggravating activities. Exercise is vital to good health and finding a way to cross train around your injury is important not only for your physical health, but for your mental health as well. Ask me about cross training options for your injury.