



AUCKLAND BONE AND JOINT SURGERY

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Rehabilitation prescription for:

label

Dr. Boyle's Corocoid Transfer (Latarjet Procedure) Rehabilitation Protocol

| | |
|-------------------|----------------------|
| Diagnosis: | |
| Surgery: | Surgery date: |

| | WEEK | | | | | | | | | | MONTH | | | |
|--|------|---|---|---|---|---|---|---|---|----|-------|---|---|---|
| | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 | 3 | 4 | 5 | 6 |
| PHASE 1 EXERCISES PROM | | | | | | | | | | | | | | |
| Pendulums | • | • | • | • | • | • | • | • | • | | | | | |
| Forward Elevation 0 to 90 | | | • | • | • | | | | | | | | | |
| Full Forward Elevation | | | | | | • | • | • | • | • | | | | |
| Abduction 0-60 | | | • | • | • | | | | | | • | • | • | • |
| Abduction 0-90 | | | | | | • | • | • | • | • | • | • | • | • |
| External Rotation 0 to 30 | | | | | | • | • | • | | | | | | |
| External Rotation 0 to 45 | | | | | | | | | • | • | | | | |
| Full External Rotation | | | | | | | | | | | • | • | • | • |
| Full Internal Rotation | | | • | • | • | • | • | • | • | • | • | • | • | • |
| PHASE 2 EXERCISES AROM | | | | | | | | | | | | | | |
| Pendulums | • | • | • | • | • | • | • | • | • | • | | | | |
| Full Forward Elevation | | | | | | • | • | • | • | • | • | • | • | • |
| Abduction 0-60 | | | • | • | • | | | | | | • | • | • | • |
| Abduction 0-90 | | | | | | • | • | • | • | • | • | • | • | • |
| External Rotation 0 to 30 | | | | | | • | • | • | | | | | | |
| External Rotation 0 to 45 | | | | | | | | | • | • | | | | |
| Full External Rotation | | | | | | | | | | | • | • | • | • |
| Full Internal Rotation | | | • | • | • | • | • | • | • | • | • | • | • | • |
| PHASE 3 STRENGTHENING EXERCISES | | | | | | | | | | | | | | |
| External Rotation | | | | | | • | • | • | • | • | • | • | • | • |
| Internal Rotation | | | | | | • | • | • | • | • | • | • | • | • |
| Forward Punch | | | | | | • | • | • | • | • | • | • | • | • |
| Seated Rows | | | | | | • | • | • | • | • | • | • | • | • |
| Shrugs | | | | | | • | • | • | • | • | • | • | • | • |
| Curls | | | | | | • | • | • | • | • | • | • | • | • |
| PHASE 4 RETURN TO HIGH LEVEL ACTIVITIES | | | | | | | | | | | | | | |
| Golf | | | | | | | | | | | | • | • | • |
| Tennis | | | | | | | | | | | | • | • | • |
| Rugby/Soccer/Hockey | | | | | | | | | | | | | • | • |
| Cricket/Softball | | | | | | | | | | | | • | • | • |

* Keep hands within eyesight, minimize overhead movements

* No military press, pulldowns behind neck or wide grip bench until Dr. Boyle advises

* Sling x 6 weeks at all times (except for physiotherapy exercises), including sleep

Additional Instructions:

Matthew J. Boyle, BSc, MBChB, FRACS

Date: