BaylorScott&White
ORTHOPEDIC ASSOCIATES OF DALLAS
A member of HealthTexas Provider Network

Manoj P. Reddy, MD
Sports Medicine & Shoulder Surgery
Orthopedic Associates of Dallas
469.800.7200 office | 469.800.7210 fax
DallasOrtho.com | ReddyOrtho.com

Latarjet (Coracoid Transfer)

REHABILITATION PROTOCOL

PHASE	RANGE OF MOTION	IMMOBILIZER	THERAPEUTIC EXERCISE
Phase I **0–6 weeks** GOAL TO ADVANCE *Motion within limits; minimal pain*	Weeks 0-2: gentle passive flexion and scaption; ER to neutral only. Weeks 3-4: active-assisted begins; flexion 120°, IR 45°. Weeks 5-6: active begins; flexion as tolerated, ER 45°, IR 50°	Sling at all times, including sleep; discontinue at 6 weeks	Elbow/hand ROM, pendulums, grip. No isometrics weeks 0-2. Weeks 3-6: scapular retraction, gentle isometrics with arm at side
Phase II **7–8 weeks** GOAL TO ADVANCE *Good scapular control; pain-free*	Progress all planes; ER stays gentle	None	Light strengthening: scaption to 90°, side-lying ER, prone rows. Cross-body and sleeper stretch. No heavy loading of the front of the shoulder
Phase III **9–12 weeks** GOAL TO ADVANCE *Full motion except ER; no apprehension*	Restore full motion (ER may lag)	None	Add resistance; ER/IR toward 90°; biceps curls; push-up progression (wall → floor); prone Y's; band diagonals
Phase IV **13–20 weeks** GOAL TO ADVANCE *ER/IR strength ≥80% of other side*	Maintain; ER stretching at 90°	None	Plyometrics, endurance, light sport (swimming, half golf swings); interval return-to-sport program weeks 16-18**
Phase V **21–28 weeks** GOAL TO ADVANCE *≥90% strength; physician clearance*	Full without discomfort	None	Modified bench with block, single-arm plyometrics, sport-specific drills; unrestricted activity**

NOTES

**If approved by physician

NOTE: Some permanent loss of external rotation is expected. Report new pain over the front of the shoulder or clicking from the screws