STEPHAN J. SWEET, M.D., M.P.H.

A Professional Corporation

Sports Medicine, Arthroscopy, & General Orthopedic Surgery

PHYSICAL THERAPY PRESCRIPTION

DIAGNOSIS:(RIGHT/LEFT)

DATE____

SWIMMER'S SHOULDER PHYSICAL THERAPY PRESCRIPTION

Underlying problem includes: Weakness/ fatigue of scapular stabilizers (especially retractors) Inflexibility of pectoral muscles Anterior capsular laxity Posterior capsular/ Rotator cuff tightness Posterior Rotator cuff weakness

<u>RX:</u>

- Development of core strength: lumbar stabilization, abdominals, pelvic girdle
- Avoid/correct excessive anterior pelvic tilt/ lumbar lordosis
- Initial phase (Acute pain) : Modalities as needed – Phonophoresis/ Iontophoresis/ Soft Tissue Mobilization/ E-Stim Cyrotherapy/ Ultrasound Submaximal isometrics Progress to isotonic exercises
- Endurance training for scapular stabilizers: focus on Serratus Anterior, Rhomboids, Lower Trapezius, and Subscapularis:

	Push-ups with a plus
	Scapular elevation (scaption)
	Rows
	Press-ups
	Upper body ergometry for endurance training
	Prone lying horizontal flys
	Side-lying external rotation, prone rowing into external rotation
	Push-ups onto a ball
•	Proprioreceptive Neuromuscular Facilitation (PNF) patterns to facilitate
	Agonist/ antagonist muscle co-contractions
•	Rotator cuff (external rotation) strengthening: goal is FR: IR ratio at least 6

- Rotator cuff (external rotation) strengthening: goal is ER: IR ratio at least 65%
- Stretching of pectoral mescles, posterior capsule, posterior rotator cuff, latissimus.
- Generally do not need to stretch anterior shoulder

Treatment:	times per week	Duration	Weeks	Home Program		
**Please send progress notes.						
Physician's						
Signature:						

Stephan J. Sweet, M.D., M.P.H.