

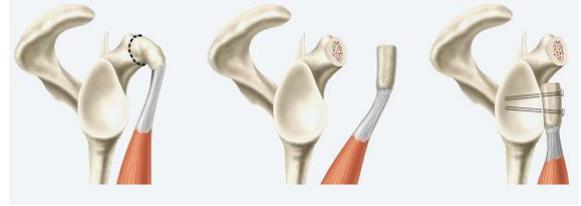
# PATIENT EDUCATION: 0-6 weeks post-operatively

## LATARJET PROCEDURE FOR ANTERIOR STABILIZATION

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### General Information

Shoulder instability is caused by a variety of issues such as overuse activity, traumatic dislocation or a congenital deformity. The Latarjet procedure is used to regain lost stability by increasing the amount of bone in the shoulder socket and using the muscles to create a sling to help support the shoulder in the front of the joint. Surgical stabilization of the shoulder joint is indicated after conservative treatment fails and recurrent instability/subluxation/dislocations continue.



### Shoulder Precautions

- Only passive shoulder range of motion (not active) until week 3
- Avoid activities that put excessive stress on the front of the shoulder i.e. reaching behind your head
- Sling is worn up to 3 weeks post-op and only removed for exercise or bathing as directed
- No lifting of objects or supporting body weight with operative extremity
- Sleep with sling supporting operative extremity, when lying down place a towel under the elbow to prevent excessive stress on the front of the shoulder (should be able to visualize your elbow)
- Keep incision clean and dry

#### Post surgical/Intermediate Phase:

- Passive range of motion (PROM) typically begins in first 2 weeks or as directed by physician
  - Forward flexion and scaption
  - Internal and external rotation through limited ROM
- Active range of motion (AROM) of elbow, wrist and hand
- Active assisted range of motion (AAROM) of the shoulder typically begins at week 3
- Scapular isometrics
- Strengthening typically begins at week 6

#### Goals

- Patient and family independent with joint protection, PROM, assisting with putting on/taking off sling, home exercise program, use of ice for pain management
- Promote soft tissue healing and maintain integrity of surgical repair
- Progress shoulder PROM
- Restore AROM of elbow/wrist/hand
- Progress AAROM to AROM of shoulder

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