

Lower Trapezius Tendon Transfer Rehab Protocol

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General Principles

- First 8 weeks after surgery is focused on letting the tendon transfer heal
 - Excessive movements during this time can stretch out or tear the transferred tendon so that it will not function
- Weeks 8-16 are spent regaining shoulder range of motion but not strength
- Encourage hand/wrist ROM and strengthening throughout
 - Stress ball use is encouraged

0-8 Weeks

- External rotation immobilizer full time
- Encourage hand/wrist/elbow ROM and stress ball

8-16 Weeks

- External rotation immobilizer
 - Wear in public weeks 8-12
 - May discontinue completely at week 12
- ROM
 - NO internal rotation (reaching behind back or into pocket)
 - Active and active assisted ROM exercises
 - Supine assisted flexion
 - Supine dowel assisted forward flexion and scaption
 - Wall towel forward flexion and scaption
 - Progress to upright active motion as proper mechanics allow (avoid scapular elevation)
- No passive ROM
- No strengthening
 - No weightbearing through surgical arm
 - No lifting more than 5#
- Conditioning allowed:
 - Walking on treadmill
 - Stationary bike one-handed

16-24 Weeks

- No immobilizer
- ROM
 - May begin gentle active internal rotation (not passive)
 - Active ER and scaption exercises to re-train the trapezius muscle

- Strengthening
 - May begin gentle strengthening with light resistance bands
- Conditioning allowed:
 - Walking on treadmill
 - Stationary bike one-handed
 - Jogging

24+ Weeks

- Progress strengthening exercises
 - Light weights, high reps still preferred
- ROM
 - May do passive ROM if necessary for stiffness
- May weight-bear through arm
- No formal lifting restriction