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FROZEN SHOULDER PHYSICAL THERAPY PRESCRIPTION

Diagnosis: Adhesive Capsulitis (Frozen Shoulder)

Cause of frozen shoulder:

- Idiopathic: The cause is not known, but typically affects females more than males aged 40-60.
- Systemic: Associated with a systemic condition such as diabetes or hypothyroidism.
- Secondary: Frozen shoulder can be secondary to trauma or avoidance of painful movements due to another shoulder condition such as a rotator cuff tear, impingement, or tendonitis.

UNDERLYING PHILOSOPHY: Restore range of motion first then begin strengthening. This will be a slow process that can take 12-18 months.

___ Range of Motion (Increase IR, ER, FE, ABD) Active / Active-Assisted / Passive
___ Rotator Cuff and Scapular stabilization program exercises, begin below horizontal (ONLY AFTER
> 80% OF ROM RESTORED)
___ Progress to 45° / 90° as tolerated in pain free arc

___ Begin with Isometrics for Rotator Cuff
Progress to Theraband, then to Isotonics
___ Progress to Deltoid, Lats, Triceps, and Biceps
Progress scapular stabilizers to Isotonics below horizontal
____ Modalities prn

ADHESIVE CAPSULITIS – "FROZEN SHOULDER"

STAGE 1
0-3 MONTHS
INFLAMMATORY SYNOVITIS (PAIN)
DECREASED RANGE OF MOTION >> DUE TO PAIN

CONSERVATIVE THERAPY – STEROID INJECTION (x2)

STAGE 2
3-9 MONTHS SYNOVITIS CAPSULE THICK STIFF !!!
CONSERVATIVE THERAPY – STEROID HELPS THE PAIN
STIFFNESS - TWO OPTIONS:
PHYSICAL THERAPY >> STRETCH !!!
SURGERY >> MANIPULATION UNDER ANESTHESIA

STAGE 3
9-12 MONTHS
STIFF
NO PAIN

STAGE 4
12-24 MONTHS "THAWING STAGE"
THE BODY REMODELS THE CAPSULE >> FLEXIBILITY