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## **Post-Operative Rehabilitation Guidelines for Arthroscopic Lysis of Adhesions, Manipulation Under Anesthesia**

**Frequency: 3-4 times per week for 2 weeks, then 2-3 times per week for 4 weeks**

### **PHASE I (Weeks 0 – 2): Period of protection, decrease edema, activate quadriceps**

- Weightbearing: As tolerated
- Hinged Knee Brace: If provided – worn locked in extension at night only
- Range of Motion: AAROM → AROM as tolerated
- Therapeutic Exercises: Patellar mobs, quad/hamstring sets, heel slides, Gastroc/Soleus stretching, straight-leg raises, planks, bridges, stationary bike, supine and prone PROM/ capsular stretching with and without Tib-Fem distraction
- Modalities: Per therapist, including electrical stimulation, ultrasound, heat (before), ice (after)

### **PHASE II (Weeks 2 – 4): Period of protection, decrease edema, activate quadriceps**

- Weightbearing: As tolerated
- Hinged Knee Brace: None
- Range of Motion: Aggressive full ROM
- Therapeutic Exercises: Advance Phase I exercises, Patellar mobs, quad/hamstring sets, heel slides, nonweightbearing Gastroc/Soleus stretching, straight-leg raises
  - o Advance rectus femoris/anterior hip capsular stretching. Incorporate cycling, elliptical and running when tolerated.
- Modalities: Per therapist, including electrical stimulation, ultrasound, heat (before), ice (after)

### **Phase III (Weeks 4 - 12)**

- Weightbearing: Full
- Hinged Knee Brace: None
- Range of Motion: Aggressive full ROM
- Therapeutic Exercises: Advance Phase II exercises, add sport-specific exercises as tolerated. Maintain core, glutes, hip and balance program
- Modalities: Per therapist, including electrical stimulation, ultrasound, heat (before), ice (after)