

Pre-Surgery Rehabilitation Program

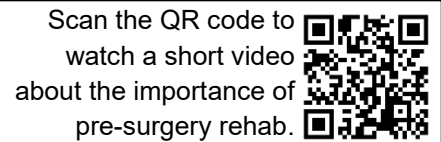
for
Shoulder Injuries

October 2025

This protocol is designed to assist you with your preparation for surgery and should be followed under the direction of a physiotherapist.



Shoulder Injuries Pre-Surgery Rehabilitation



Why are these exercises important?

- Your surgeon recommends that you complete this exercise program to prepare for your upcoming surgery and/or to get the best possible result from your injury rehabilitation.
- Strengthening the muscles around your shoulder will make your shoulder more stable and will help with your recovery from surgery.
- You should also incorporate 20-30 minutes of cardio exercises at least 3x/week (all low-impact and low risk activities e.g. elliptical trainer, cross-country skiing, stationary cycling or hiking).

How often should I do these exercises?

- All exercises should be done **1 - 2 times per day**.
- It is important that you do all of the exercises on both arms.
- Whenever you can, do your exercises in front of a mirror to make sure you are doing them correctly.

How many exercises should I do?

- Each exercise should be done smoothly and slowly.
- Start with one set for each exercise. Your therapist will recommend the number of exercises you should do based on your muscle strength and endurance.
- Once you can comfortably do one set of each exercise, progress to 2 sets and once you are strong enough, then 3 sets. Your physiotherapist might recommend for some exercises to be done until you fatigue or until you lose the form of the original exercise position.
- Aim to challenge yourself when doing your exercises to get the greatest strength and stability improvements.

What if I have increased pain or swelling?

- If you have increased pain that lasts longer than 1 or 2 hours after you have finished your exercises, decrease the amount you are exercising by 20% the next time.
- If you have increased swelling after these exercises please use rest, ice, compression and elevation.
- If symptoms do not improve, or swelling lasts longer than 48 hours, call your physiotherapist to review your program.

Notes for Physiotherapists:

Please assess the number of sets/repetitions and ranges of motion for the exercises as applicable. Thank you.

***If you have any questions please contact Sarah Kerslake at:
sarah@banffsportmed.ca or 403 760 2897 ext 6***

Phase 1: Strength Basics

- **Supine Punch**

Lie down with your knees slightly bent, feet flat, your arms at your side, and your elbows bent at 90 degrees. Keep your shoulders relaxed, your core engaged, and your spine in a neutral position. From the bent-arm position, slowly extend your arm by straightening your elbow. As you do this, reach your hand upward as if you're punching straight toward the ceiling. At the top of the movement, your arm should be straight and your shoulder blade slightly lifted.

Slowly lower your arm by bending the elbow back to the 90-degree starting position.

Sets: 3 Reps: 12



- **Isometric Rotator Cuff Contractions**

Sit or stand with your shoulders relaxed, back straight, and head in a neutral position. Place a rolled towel or small cushion between your upper arm and torso. Your elbow should be bent to 90 degrees, forearm parallel to the floor. Don't allow your shoulder to shrug or your torso to rotate. The movement should come from gentle muscular engagement, not from actually moving your arm/body.

For **internal rotation**, place your **palm** against a wall or door frame and gently press **inward**, as if trying to rotate your arm toward your belly without moving it.

For **external rotation**, place the **back of your hand** against the wall and gently press **outward**, as if rotating your arm away from your body.

Sets: 3 Reps: 10 Hold: 8-15 seconds



Note: You should feel a focused activation deep in the front of your shoulder (for internal rotation) or back of your shoulder (for external rotation). Keep the effort firm and controlled and avoid holding your breath or tensing your neck.

- **Isometric Anterior Deltoid Hold**

Stand facing a wall with your feet shoulder-width apart, core lightly engaged, and back in a neutral position. Place a rolled towel or small cushion between your elbow and torso. Bend your elbow to 90 degrees so that your forearm is parallel to the floor. Make your hand into a fist, gently press it into the wall. Engage the front of your shoulder (anterior deltoid) while keeping your shoulder blade stable and core engaged. Avoid shrugging your shoulders or leaning forward.

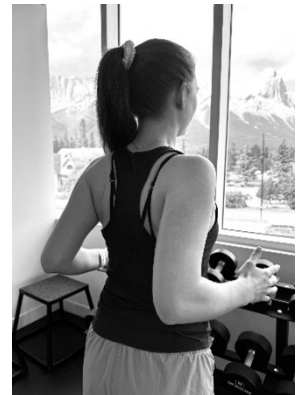
Sets: 3 Reps: 10 Hold: 8-15 seconds



- **Scapular Retraction (Shoulder Blade Squeeze)**

Squeeze your shoulder blades gently together and downward. Avoid shrugging or moving your shoulders upward. Focus on smooth symmetrical movement and avoid arching your back.

Sets: 3 Reps: 8 Hold: 10-15 seconds



- **Ball Stabilization Wall Circles**

Stand facing a wall with your feet shoulder-width apart. Press a small ball (e.g., tennis ball, lacrosse ball, or soft therapy ball) against the wall using the palm of the hand of your affected shoulder. Apply gentle, consistent pressure into the ball so that it stays in place against the wall. Begin drawing small, slow circles with your hand clockwise for 30 seconds. Reverse the direction and repeat the motion counterclockwise for 30 seconds.

Sets: 4



Note: Focus on moving from your shoulder and not your wrist or elbow (avoid winging your elbow out or shrugging your shoulder upwards).

****Caution is advised for the following “wall push-up plus” exercise if you have posterior shoulder instability. Please consult your physiotherapist prior to completing this exercise if you are having a posterior stabilization procedure.****

- **Wall Push-Up Plus**

Place your hands flat against a wall, slightly below shoulder height, and shoulder-width apart. Keep your feet shoulder-width apart, core lightly engaged, and back in a neutral position.

Bend your elbows and lower your chest slightly toward the wall in a controlled motion. Keep your elbows pointing down and slightly out (not flaring wide).

As you press back up to the starting position, continue pushing your hands into the wall until your shoulder blades move away from your spine. Imagine you are trying to reach forward without rounding your upper back.

Slowly return to your neutral starting position. Avoid rushing or collapsing the movement.

Sets: 3 Reps: 10



Phase 2: Progressive Conditioning

After you have completed 4 - 6 weeks of Phase 1 exercises, you should be reassessed by your physiotherapist and progress to the second phase. Before you start Phase 2, you must be able to complete 3 sets of ≥ 10 repetitions of the Phase 1 exercises with good control.

- **Prone Rows**

Lie face down on a firm elevated surface such as a bench, table, or therapy ball, with your chest supported and arms hanging straight down toward the floor.

Maintain a neutral neck position by keeping your gaze downward (don't tilt your head up).

Bend your elbows to 90 degrees and drive them up towards your body.

Pause briefly at the top of the row, squeezing your shoulder blades together.

Slowly lower your arms back down to the starting position with control. Avoid letting your shoulders round forward or collapsing through your upper back.

Sets: 3 Reps: 8



Note: To progress this exercise, you can hold light weights (2 - 5lbs) in both hands.

- **Side Lying External Rotations**

Lie on your unaffected (healthy) side, with your affected (injured) arm on top. Place a rolled towel or small pillow between your elbow and your torso. Keep your shoulders stacked, core engaged, and neck relaxed.

Bend your affected arm's elbow to 90 degrees, so your forearm rests across your abdomen and your elbow is tucked against your side.

Hold a light dumbbell or small weight (1-3 lbs) in your top hand with your palm facing inward.

Rotate your arm outward, lifting slowly towards the ceiling. Rotate only at the shoulder while keeping your elbow fixed in place at your side.

Stop when your forearm is vertical, pause briefly, then slowly return to the starting position with your forearm across your abdomen. Avoid letting the weight drop.

Sets: 3 Reps: 10



- **Straight Arm Pull Down**

Anchor a light resistance band overhead (e.g., in a door, railing, etc.).

Hold the resistance band with your hands at shoulder height. Keep your elbows straight and pull the band down and back towards your hips (not straight down).

Pause briefly when at the bottom, then slowly return to the starting position.

Sets: 2 Reps: 10

Note: Don't let the band pull you back to the starting position; move slowly and with control.



- **Band Pull Aparts**

Stand upright with your core engaged. Hold a light to moderate resistance band out in front of you with your elbows slightly bent and your palms facing upwards.

Slowly pull your arms straight out to the side, forming a “T” shape with your body. Keep your hands and arms at shoulder height throughout the movement.

Focus on squeezing your shoulder blades together as your hands move outwards. Maintain even tension in both arms and avoid shrugging your shoulders. Pause briefly, then slowly return to the starting position.

Sets: 3 Reps: 10



Note: Don't let the band pull you back to the starting position; move slowly and with control.

- **Shoulder Flexion with Resistance Band**

Use a light to moderate resistance band securely anchored under your foot.

Stand upright with your feet hip-width apart and your core engaged.

Hold the end of the band with your palm facing inward (thumb facing forward) and arm at your side with your elbow straight but not locked.

Slowly raise your arm straight in front of you to shoulder height (90 degrees of flexion), keeping your palm facing in and the motion smooth. Do not shrug your shoulders or lean back. Pause briefly at the top, then slowly return to the starting position. Avoid letting the band pull you back, lower with control.

Sets: 3 Reps: 10



- **Serratus Wall Slides**

Stand facing a wall about arms length from the wall with your feet hip-width apart. Place your arms into a pillowcase, up to the elbows, and position your forearms against the wall with your elbows bent at 90 degrees and your hands at shoulder height.

Keep your shoulders relaxed, core gently engaged, and spine neutral (looking straight forward). Slowly slide your forearms upward along the wall, focusing on allowing your shoulder blades to rotate upward and outward as your arms rise. Keep gentle pressure against the wall the whole time. Slide up to a comfortable end range, ideally just above shoulder height, or as tolerated.

Pause briefly at the top, then slowly return to the starting position maintaining contact with the wall the whole time. Avoid letting your shoulders shrug or collapse.

Sets: 3 Reps: 8



*****Caution is advised for the following “wall plank shoulder taps” exercise if you have posterior shoulder instability. Please consult your physiotherapist prior to completing this exercise if you are having a posterior stabilization procedure.*****

- **Wall Plank Shoulder Taps**

Stand facing a wall and place your hands flat at shoulder height, slightly wider than shoulder-width. Form a straight line from your head to your heels. Keep your shoulder blades wide and stable, avoiding letting your chest collapse towards the wall.

Slowly lift one hand off the wall and tap your opposite shoulder. Keep your hips level and your body as still as possible. Avoid twisting and shifting your weight from side-to-side. Return your hand to the wall and repeat on the other side. Continue alternating sides with slow, controlled taps.

Sets: 3 Reps: 12

Note: To progress this exercise, perform this exercise on an incline bench or step, on the ground in a modified high plank (on your hands and knees), or in a full high plank (on your hands and toes). Talk with your physiotherapist before attempting this progression.

