



## Post-Operative Protocol for Patients Following InSpace™ implantation

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If you have any questions about this protocol or about the patient, do not hesitate to email Dr. Metzler at: [ametzler@orthocincy.com](mailto:ametzler@orthocincy.com) or at [adammetzlermd.com](http://adammetzlermd.com)

Below is the recommended post - operative instructions following InSpace™ implantation with no tissue repair. Please note: If tissue was repaired then an obligatory period of protection (immobilization) is necessary (usually this is for no less than 4 and up to approximately 6 weeks).

#### Phase I – Early Motion Phase I 0-3 Weeks

- **Must use Sling for 10 days**
- Passive (PROM) to Active Assisted shoulder ROM (AAROM), as tolerated

<b>Day 1</b>	<ul style="list-style-type: none"> <li>• Elbow, wrist, and hand exercises</li> <li>• Sling use</li> </ul>
<b>Day 10–14</b>	<ul style="list-style-type: none"> <li>• Discontinue sling use</li> <li>• Pendulum (Codman), rope and pulley, AAROM supine, deltoid isometrics</li> <li>• Isometrics: internal rotation (IR), external rotation (ER), &amp; deltoid</li> <li>• Passive ROM progressing to active ROM (AROM) 90° of flexion</li> <li>• External rotation with arm at side to tolerance: AAROM &amp; PROM               <ul style="list-style-type: none"> <li>○ No rotation with arm in abduction until 4 weeks</li> <li>○ With distal clavicle excision, hold cross body adduction until 8 weeks</li> <li>○ Avoid abduction and 90/90 ER until at least 6 weeks</li> </ul> </li> </ul>
<b>Week 3</b>	<ul style="list-style-type: none"> <li>• Modified Abduction (Bar) AAROM (30° abduction progress to 45°), seat table slides – flexion only</li> <li>• Strengthening: advance to resistance bands as tolerated – IR, ER, and rowing with arms at side</li> </ul>

#### Phase II – ROM Progression Phase I 4-7 Weeks

<b>Week 4</b>	<ul style="list-style-type: none"> <li>• Progress AROM flexion in supine (Goal 90–145°)</li> <li>• Progress resistance bands:               <ul style="list-style-type: none"> <li>○ Shoulder extension</li> <li>○ Scapula retraction</li> <li>○ Lower trapezius exercise (ER/IR with arm at side)</li> </ul> </li> </ul>
<b>Week 5</b>	<ul style="list-style-type: none"> <li>• Progress AROM flexion as tolerated-standing (goal to overhead motion)</li> </ul>
<b>Week 6</b>	<ul style="list-style-type: none"> <li>• Initiate side lying light dumbbell</li> </ul>

#### Phase III - Dynamic Strengthening Phase I 8-12 Weeks

<b>8–9 Weeks</b>	<ul style="list-style-type: none"> <li>• Advance to standing, painless flexion to 90° AROM (with light weight)</li> <li>• Initiate AROM full flexion in scapular plane 160°-180°</li> </ul>
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<b>9–12 Weeks</b>	<ul style="list-style-type: none"><li>• Continue strengthening as tolerated to normal ADLs</li></ul> <p>*Only do strengthening 5–6 times/week, no more than once daily, to avoid overuse *Perform AROM exercises 2-3 times per day, use arm for functional daily activities in pain-free ROM</p>
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### Phase IV- Return to Activity Phase I > 12 Weeks

<b>&gt;12 Weeks</b>	<ul style="list-style-type: none"><li>• Continue with Fundamental Maintenance Exercise Program of AROM, strengthening and returning to physical ADLs and sport such as golf, hiking, cycling etc.</li></ul> <p><u>Fundamental Maintenance Exercise Program</u></p> <ul style="list-style-type: none"><li>• Collapsible bar exercises (external/internal rotation)</li><li>• Active assisted flexion in the supine position</li><li>• Resistance band exercises<ul style="list-style-type: none"><li>○ External/internal rotation,</li><li>○ Horizontal abduction with elbows bent,</li><li>○ Lower trapezius</li><li>○ Rowing</li></ul></li><li>• Standing active flexion &amp; extension exercise</li><li>• Active forward flexion (standing with weight)</li></ul>
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