Center for Athletic Medicine
Dr Preston Wolin
Latissimus Dorsi Transfer Protocol
(Partially adapted from Brigham and Women's Hospital protocol)

~Please call 773-248-4150 with any and all questions~

Post op Day 1 to Week 6:

- Patient placed in abduction brace for 6 weeks (worn at all times except for PT and washing)
- Perform PROM for scaption, flexion, and ER to begin at 3 weeks post op **(NO adduction, IR, or extension PROM). Do not force flexion PROM.**
- Perform elbow, wrist, hand, cervical AROM exercises
- No upper extremity weight-bearing on surgical arm
- Exercises: scapular retractions, shoulder shrugs, submaximal deltoid isometrics
- Modalities used for pain

Post op Week 6 to 12:

- Gradually wean from sling
- Start PROM for IR and adduction (not forceful)
- Start AA/AROM for flexion, abduction, and ER – start in supine and side lying then progress to antigravity positions as appropriate
- Scapular strengthening (exercises to include prone rows, scapular retraction, shoulder IR isometrics gentle and pain-free, wall or table push up plus). NO shoulder strengthening.
- No lifting or carrying with operative shoulder
- Please try and facilitate use of latissimus muscle to function as an external rotator and elevator. Use biofeedback and / or NMES as needed.
- Light open chain proprioceptive and rhythmic stabilization exercises as tolerated
- Joint mobilizations as indicated

Post op Week 12+:

- Continue with muscle re-education
- Strengthening exercises of the rotator cuff and shoulder (exercises to include biceps, triceps, shoulder IR, shoulder ER starting with isometrics and progressing to isotonics, deltoid, periscapular musculature, light closed chain activities, rhythmic stabilizations)
- No heavy lifting or weights; no sports play
- Joint mobilizations as needed

Advanced strengthening:

- Continue to progress with exercises
- Gentle weight training: No wide grip exercises – always able to see hands during exercise; avoid cross body activities
- Light sport / recreation activity (discuss with MD)
- Ensure good scapular humeral rhythm