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How to do physical therapy on shoulder

Our physical therapists work closely with our physicians and see a range of musculoskeletal injuries and disorders. Together, our team of experts creates a customized plan to help patients achieve the highest level of function and offers one-on-one care. They utilize cutting-edge technologies, including the AlterG treadmill, Shockwave, 2-D video analysis, and HydroWorx underwater treadmill to aid in overall patient care and recovery*. Additionally, our physical therapists collaborate with our performance team to provide movement analysis and sports-specific assessments. *Equipment may vary per location; contact site for further details Physical therapy is an individualized program of gentle stretching and exercises that are used in rehabilitating an existing injury and preventing a future injury. Through consultation with a physical therapist, the participating patient will work to restore strength and flexibility in muscles surrounding the injury site in hopes of reducing the degree of limitation and restoring functionality. Related Definitions Other Specialty Areas Physical therapy is a key component in many rehabilitation programs. Learn more about the role physical therapists play in: Physical therapy (PT) is an important and effective way to deal with one of the primary symptoms of lupus: joint pain and arthritis. If you suffer from systemic lupus erythematosus (SLE), you may work with a physical therapist to help restore your physical function, improve your mobility, relieve your pain, and prevent or limit any permanent physical disability. Trevor Adeline / Calaimage / Getty Images The overall goal of your physical therapy will be to restore, maintain and promote your musculoskeletal fitness and health. Physical therapy should reduce your pain and inflammation, help you feel less stiff and keep you mobile. After examining your medical history, the physical therapist will test your: strength range of motion balance and coordination posture muscle performance respiration motor function Based on these tests, the therapist will develop a customized treatment plan to help you overcome physical obstacles from the disease. Physical therapy treatment for lupus often includes exercise to increase flexibility and range of motion. As you continue with your therapy, more advanced exercises will also focus on improving: strength balance coordination endurance Some of your physical therapy may take place in a pool. The water is a great place to exercise inflamed joints because it's buoyant and soothing. Your physical therapist can also help you learn how to best use a cane or a walker if they are needed. Some of the exercises you do in physical therapy might be aerobic, especially if your lupus is relatively mild. People with lupus tend to exercise less and have lower endurance than people who do not have the health condition. Aerobic exercise has been shown to help people with mild lupus improve aerobic capacity and feel less fatigued. It may also help to improve blood vessel function. If you have pain after your physical therapy session that lasts more than 1 to 1.5 hours, talk to your physical therapist. He or she should adjust your exercises to make them less intense and/or shorter in duration. Electrical stimulation, hot packs or cold compresses and ultrasound may be used to relieve pain and reduce swelling. Massage therapy can relieve pain and improve circulation and flexibility. Most licensed physical therapists have a doctorate degree, though some may just have a master's degree from an accredited physical therapy program. Physical therapists study biology, chemistry, and physics, as well as biomechanics, neuroanatomy, human growth and development, manifestations of disease, examination techniques, and therapeutic procedures. Thanks for your feedback! What are your concerns? The shoulder joint is a complicated structure and surprisingly prone to injury. For instance, the ball of the joint, which is located at the end of the upper arm bone (the humerus), can slip out of the socket—the cup-shaped structure at the end of the collarbone. Sometimes, the joint will pop back together spontaneously; this injury is considered a subluxation of the joint. If the ball and socket stay separated, it's called a dislocation. Blue Jean Images / Getty Images Most shoulder injuries of this type are caused by some sort of trauma: a forceful blow from beside or behind the shoulder while playing a sport, for example. Falling and landing on an outstretched hand also could cause the shoulder joint to separate. And people born with especially loose shoulder joints, a condition called shoulder multidirectional instability are prone to frequent subluxation. Whatever the nature of the injury and whatever the cause, if you have a shoulder dislocation, it's likely you'll need physical therapy after your shoulder joint has been repositioned correctly and any secondary damage, such as a torn rotator cuff or fracture of the humerus has been treated. Chances are your arm will be in a sling for a while after your shoulder is treated, especially if you had surgery. Even so, your doctor may send you to a physical therapist right away so you can start some preliminary exercises to prevent your shoulder from becoming frozen due to immobility. He'll provide a prescription for the type of exercises you should do based on your injury and treatment that the physical therapist will then use to create a PT program for you. At your first appointment, the therapist will ask you questions about your injury, your pain level, and your ability to move after surgery. They'll take measurements of your range of motion and strength to create a baseline for comparison as you progress in your treatment. Your PT should also work with you to develop reasonable and achievable goals for your shoulder dislocation rehab. Your goals can help motivate you in PT and give you something to strive for as you go through rehab. In order to get your shoulder back to health after a dislocation, your physical therapy will need to focus on several factors. Pain relief. Shoulder injuries hurt, so do shoulders that have been operated on. Besides pain, you'll likely have swelling and bruising. Part of your PT may include icing and or heat to help ease pain and reduce inflammation. Some therapists use modalities like ultrasound and transcutaneous electrical nerve stimulation (TENS) for pain, but research studies have shown that these treatment methods aren't very effective, so many PTs no longer offer them. Range of motion. In order to loosen up muscle tightness in the shoulder that can limit how far you're able to move your arm, the therapist will likely do some passive motion work with you, in which they move and gently stretch your arm in different directions. They also may teach you ways to do this kind of stretching yourself. Strength. Restoring strength to the muscles that surround and support the shoulder joint is vital to giving it the stability it needs to function normally. These are the rotator cuff muscles, the biceps and triceps, and the muscles that support the shoulder blade. Occasionally, the muscles around your shoulder are not able to contract properly. Your physical therapist may choose to use an electrical stimulation device called neuromuscular electrical stimulation (NMES) to help your muscles regain the ability to contract. Posture. Rounded shoulders and other improper postures can interfere with how well the shoulders work, so your therapist may have you work on improving your posture. The better aligned your skeleton is overall, the more easily you'll be able to move and function. While every injury is different and everyone heals at different rates, most people are back to normal after dislocating a shoulder after several weeks. If the injury to your shoulder is severe or you required surgery, it will take longer. Either way, you can trust that your surgeon and physical therapist will work together to make sure the therapy you do is targeted to getting you back to normal as soon as possible. A shoulder dislocation can be a painful injury, and it may limit your ability to perform normal work and recreational activities. If you have suffered a shoulder dislocation, working with your PT can help you quickly and safely return to normal function. Thanks for your feedback! What are your concerns? Verywell Health uses only high-quality sources, including peer-reviewed studies, to support the facts within our articles. Read our editorial process to learn more about how we fact-check and keep our content accurate, reliable, and trustworthy. Physiopedia. Shoulder subluxation. Updated August 20, 2019. American Academy of Orthopaedic Surgeons. OrthoInfo. Shoulder pain and common shoulder problems. Updated March 2018. Gaskill TR, Taylor DC, Millett PJ. Management of multidirectional instability of the shoulder. J Am Acad Orthop Surg. 2011;19:758-767. MedlinePlus. Dislocated shoulder. American Academy of Orthopaedic Surgeons. Rotator cuff and shoulder conditioning program. Osteogenesis Imperfecta. Neuromuscular electrical stimulation. Updated 2014. American Academy of Orthopaedic Surgeons. OrthoInfo. Dislocated shoulder. Updated October 2017. Additional Reading Ayres, H. B., Winters, B., Nuttall, C. Age-appropriate post-reduction care of anterior shoulder dislocation. Brigham Young University. ScholarsArchive. Updated September 9, 2015. A torn labrum is a problem in the shoulder that may cause shoulder pain, frequent dislocations of your shoulder, or problems with properly using your arm. Physical therapy may be necessary to help you decrease pain, improve mobility, and regain normal use of your arm after a labrum tear. Your shoulder is a ball-and-socket joint. The ball is at the end of your humerus, the arm bone, and it sits in the socket located at the end of your scapula, or shoulder blade. The ball is much bigger than the socket, which allows a lot of mobility to occur at your shoulder joint. This allows you to move your arms in many directions. Since the ball is so much bigger than the socket, the shoulder is considered a very unstable joint. The ball can easily slip out of the socket, causing shoulder pain and dysfunction. The labrum is a band of cartilage that courses around the edge of the socket in your shoulder. It serves to add depth to the socket of your shoulder joint. Imagine your shoulder as a golf ball on a tee. The ball is much bigger than the tee and can easily roll off. If the edge of the tee where the ball sits has a small band of tissue around it, the tee would be deeper, and the ball would be less likely to roll off. Thus, the labrum makes your shoulder socket deeper to help keep the ball in the joint. The labrum also serves as an attachment point for other structures in your shoulder. Some of the ligaments that support your shoulder attach to the labrum. One of the two biceps tendons attaches to the top portion of the labrum in your shoulder. Illustration by Kelly Miller. Verywell Since there are many muscles and ligaments in the shoulder, a torn labrum may be difficult to diagnose. Some of the signs and symptoms of a labrum tear include: Shoulder pain Popping, grinding, or a catching sensation in your shoulder Difficulty lifting your shoulder A feeling that your shoulder is coming out of the joint If you suspect that you have a torn labrum in your shoulder, you should consult with your doctor. He or she can confirm the diagnosis, and the proper treatment can be started right away. Your labrum in your shoulder can be injured in a number of different ways. These include but are not limited to: Sports injuries Repetitive overhead motions like throwing Falling onto an outstretched hand or onto the side of your shoulder Motor vehicle accidents Repetitive lifting of heavy items Forceful blow to your shoulder Sometimes trauma causes a shoulder labrum tear. Other times, repetitive stress and strain cause your shoulder labrum to be torn. The diagnosis of a labrum tear can be difficult because your shoulder has many small ligaments and muscles that attach around the joint. Initially, your doctor or physical therapist may perform shoulder special tests to determine if your shoulder labrum is torn. The apprehension test and relocation test are common tests to determine if your shoulder is unstable and whether a labrum tear is present. Your doctor may also take an X-ray if you have had a recent traumatic event that caused your shoulder problem. Magnetic resonance imaging (MRI) of your shoulder may be taken to visualize the inside of your shoulder to help determine if you have a labrum tear. If you have had an MRI of the shoulder and it shows a labrum tear, it is helpful to know which type of labrum tear you have. The three most common types of labrum tears are: Bankart tear: The Bankart tear occurs near the front and bottom portion of your labrum, and frequently occurs when your shoulder dislocates. SLAP tear: SLAP is an acronym for Superior Labrum, Anterior to Posterior. This is a tear in the upper portion of your labrum where your long biceps tendon attaches. Posterior labrum tear: This rare labrum tear occurs at the back of your shoulder labrum and may cause your shoulder to dislocate toward the back of your body. Regardless of the type of labrum tear, if you suspect you have one, you should see your doctor as soon as possible. If you have suffered a labrum tear, your doctor may refer you to physical therapy. There, your physical therapist will evaluate and assess your condition to help formulate a plan of care to treat your labrum. Acute labrum tears may be quite painful, and your physical therapist may provide you with treatments to control your pain. Heat, ice, or electrical stimulation like TENS may be used to help decrease your pain. Caution should be used with these passive modalities; many studies indicate that active involvement in your care is the best form of treatment. Sometimes your shoulder becomes tight after an acute labrum tear. Your physical therapist may help you work on restoring normal range of motion (ROM) on your shoulder. Care should be taken not to be too aggressive here. A torn labrum usually causes your shoulder joint to be unstable, and aggressive ROM therapy may cause your shoulder to come out of joint. Since a torn labrum may cause your shoulder to be unstable, exercises to improve strength and stability around your shoulder are an essential part of your rehabilitation. Exercise after a labrum tear may be required. Exercises to increase shoulder strength should focus on the muscles collectively called the rotator cuff. These four muscles surround your shoulder and help to keep your shoulder in place when you move your arm. Strengthening the muscles around your shoulder blade and in your arm may also help to provide stability to your shoulder after a labrum tear. Proprioception is your body's ability to recognize where it is in space. Exercises to improve the proprioception around your shoulder may be included in your treatment. Plyometric exercises may also be included in your rehabilitation program, especially if you are planning on returning to high-level sports and recreation. After a labrum tear in your shoulder, you should expect to return to normal activity in about six to eight weeks. If you are not making progress with physical therapy, you may need more aggressive treatments like shoulder surgery. Be sure to speak with your doctor about your condition to understand what to expect. A shoulder labrum tear can be a painful injury that limits your ability to use your arm normally. It may cause your arm to feel weak or unstable. Physical therapy can help increase the strength and mobility in your shoulder to help you return to normal activity quickly and safely. Thanks for your feedback! What are your concerns?

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