



Shoulder Surgery Rehabilitation Protocol

The Jean-Pierre Liotard (JPL) Technique

There are many techniques for shoulder rehabilitation after surgery. Dr Pant prefers the technique pioneered by the shoulder unit in Lyon, France. There are a few iterations of this technique; this document provides a simplified version of the original technique from Lyon.

Key benefits of the JPL rehabilitation:

- The JPL technique is unique as it allows **passive** range of motion as guided by you, the patient. There is no requirement for anyone else to move your arm.
- Your **'good'** arm does all the work - with your fingers clasped together.
- Initially you will not notice much improvement - there will be gradual improvement over days to weeks.
- Progress to the limit of your pain.
- Some patients may wish to follow this technique under the guidance of a physiotherapist.

Simplified JPL technique:

STAGE 0 (0-2 weeks)

- Remain in sling: no shoulder physio
- Can commence elbow/wrist/hand range of motion immediately after surgery

STAGE 1 (2 - 6 weeks)

- Lying down, clasp fingers together and use your 'good' arm to raise the 'bad' arm from your abdomen towards your head (Pic 1)
- Now try to raise both arms over your head and hold for 5 seconds (Pic 2)
- Complete 5 repetitions, 5 times per day
- Consider doing exercise when you're out of the shower and your shoulder is warm

STAGE 2 (6 - 12 weeks)

- Start sitting in a chair, then progress to standing when comfortable
- Clasp fingers together and place your hands on your head and rest for a few seconds (Pic 3)
- Now straighten your elbows and raise your hands above your head and hold for 5 seconds (Pic 4)
- Bring your hands back down to your abdomen, with your elbows tucked in to your side (Pic 5) take your hands out as wide as you can (Pic 6) and hold for 5 seconds.
- Complete 5 repetitions, 5 times per day

STAGE 3 (12 weeks onwards)

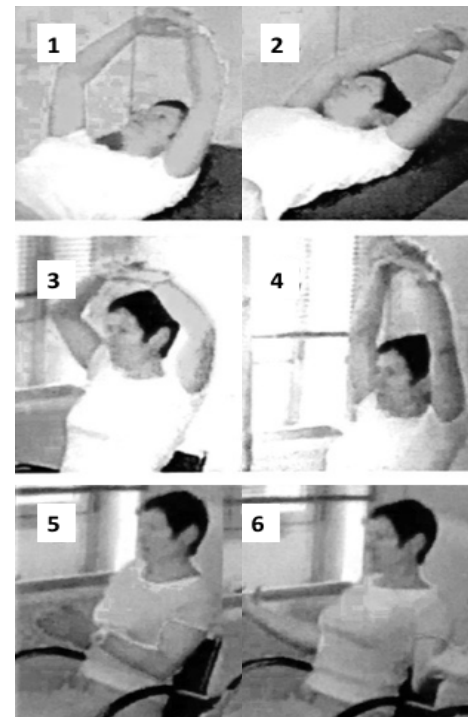
- Commence strengthening exercises as directed by your physiotherapist

Patient: _____

Date of Surgery: _____

Your surgery was:

- Arthroscopic anterior stabilisation
- Arthroscopic posterior stabilisation
- Arthroscopic SLAP repair
- Latarjet procedure
- Arthroscopic SAD and acromioplasty
- Arthroscopic AC Joint excision
- Biceps tenodesis
- Biceps tenotomy
- Arthroscopic rotator cuff repair (standard)
- Arthroscopic rotator cuff repair (complex)
- ORIF clavicle
- ORIF proximal humerus
- Anatomical Shoulder Arthroplasty
- Reverse Shoulder Arthroplasty
- Other _____



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