

# Xinning Li, M.D.

Associate Professor  
Sports Medicine and Shoulder Surgery  
Boston University School of Medicine – Boston Medical Center  
Boston University Athletics – Team Physician  
725 Albany Street – 4<sup>th</sup> Floor  
Boston, MA 02118



(617) 638-5633 (Telephone – Shapiro Office)  
(617) 358-3400 (Telephone – Ryan Center)  
(617) 414-5226 (Fax)  
[www.tigerortho.com](http://www.tigerortho.com)



**Patient Name:**

**Date:**

**Date of surgery:**

**Visit per week:** 2 to 3 times per week.

## SHOULDER PHYSICAL THERAPY PRESCRIPTION

**Dx:**

\_\_\_ Range of Motion: Active / Active-Assisted / Passive

\_\_\_ Posterior Capsule Stretching after warm-up

\_\_\_ Emphasize Internal Rotation

\_\_\_ Rotator Cuff and Deltoid Isometrics

\_\_\_ Rotator Cuff and Deltoid Cuff and Scapular Stabilization program exercises  
Begin below Horizontal  
Begin with Isometrics for Rotator Cuff  
Progress to Theraband, then to Isotonics

\_\_\_ Limit ER to neutral if Biceps Tendonitis

\_\_\_ Progress to Deltoid, Lats, Triceps and Biceps. Progress Scapular Stabilizers to Isotonics below Horizontal

\_\_\_ Return to Sport Phase:  
Emphasize Eccentric Rotator Cuff and Scapular Stabilization exercises  
Sport-specific Strengthening exercises  
Sport-specific Strengthening with Theraband  
Plyometric program for Overhead Athletes

\_\_\_ Modalities PRN Ultrasound / Phonophoresis / E-stim / Moist Heat / Ice

**Treatment:** \_\_\_\_\_ times per week

\_\_\_ Home Program

**Duration:** \_\_\_\_\_ weeks

**Re-evaluate at 12 weeks**

\* Please send progress notes \*

**Physician's Signature:** \_\_\_\_\_