



Anterior Shoulder Stabilization – Latarjet (Coracoid Bone Transfer)

Goal of Surgery

- To re-establish normal stability of the joint and maintain a good range of motion.
- To protect the bone transfer and allow coracoid graft to heal to glenoid.

Surgical Procedure

- Augment bone/soft tissue deficits on the anterior aspect of the glenoid (shoulder socket) with coracoid bone secured with screw fixation

Post Operative Protocol

- **Wear your sling for 6 weeks (including night time) to protect your repair.**
- Cracking/popping sounds (similar to cracking knuckles) are common and part of the regular post-operative course.

Weeks 0 – 6

- Wear sling full-time (including sleeping)
- May remove sling 3-4 times daily for wrist/forearm/elbow exercises. Elbow flexion against gravity only, no lifting
- Passive Forward flexion [FF] – max 90 deg.
- Passive External rotation [ER] – max 20 deg.
- Rotator Cuff Isometrics and active periscapular contractions
- NO lifting

Weeks 6 - 7

- FF – 135 deg.
- ER – 45 deg.
- Internal rotation [IR] – belt line
- Abd/ER – 50 deg.

Weeks 8 - 9

- FF – full
- ER – 60 deg.
- IR – full
- Abd/ER to 60 deg.

After 6 weeks

- May begin active range of motion to tolerance
- Gradually increase external rotations to full range by 12 wks

After 10 weeks

- May begin light strengthening of rotator cuff/elbow flexors
- No strengthening in abducted positions (until 16 weeks)
- No strengthening in overhead/impingement positions (until 16 weeks)
- No strengthening with long lever arms
- Avoid anterior capsular stress (e.g. no wide grip bench)

Return to Activities

- Computer - As soon as tolerated
- Running - 6 weeks
- Golf -12 weeks
- Play baseball - 5 months if comfortable
- Tennis/Throwing (toss) - 4 months
- Contact sports (including mountain biking, skiing, snowboarding) - 6 months