



Bryn Mawr Sports Medicine

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Sports Medicine
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MULTIDIRECTIONAL INSTABILITY POST-STABILIZATION REHABILITATION PROTOCOL

| | RANGE OF MOTION | IMMOBILIZER | THERAPEUTIC EXERCISE |
|---|--|--|---|
| PHASE I 0 - 6 weeks | 0-6 weeks: None | Immobilized at all times (except for exercise) in flexion, abduction, and 0° of rotation | 0-6 weeks: elbow/wrist ROM, grip strengthening |
| PHASE II 6 - 12 weeks | Begin active/active-assistive ROM - passive ROM to tolerance - ROM Goals: 40° external rotation, 140° of flexion, 45° of abduction | Sling worn for comfort only and at night | Continue with exercises in phase I, begin active-assistive exercises, deltoid/rotator cuff isometrics - at 8 weeks: begin resistive exercises* for scapular stabilizers, biceps, triceps, and rotator cuff No stretching or manipulation |
| PHASE III 3 - 6 months | Gradual return to full active ROM | None | Advance activities in phase II, emphasize external rotation and latissimus eccentrics and glenohumeral stabilization, begin muscle endurance activities (upper body ergometer) Sport specific rehab at 4 1/2 months Return to throwing at 6 months No collision sports for 12 months |

*Utilize exercise arcs that protect the posterior capsule from stress during resistive exercises, and keep all strengthening exercises below the horizontal plane in this phase

**Limited return to sports activities

