



Rehabilitation Protocol

Shoulder Instability: Nonoperative Treatment

Rehab Guidelines

First Time Dislocations: May be immobilized for 2-3 weeks before starting physical therapy.

Recurrent Dislocations: Physical therapy can begin immediately

Phase I: 0-4 weeks (typically)

Goals:

- Re-establish full motion
- Prevent muscular atrophy
- Decrease pain and inflammation
- Allow capsular healing
 - AAROM with wand to tolerance
 - Begin IR/ER at side, progress to 30°, 60°, then 90° AB as pain subsides
 - Submax isometrics for all shoulder musculature
 - Gentle joint mobs & PROM
 - Modalities PRN (ice, IFC-Estim etc.) to decrease inflammation and pain

Phase II: 4-8 weeks

Goals:

- Increase dynamic stability
- Increase strength
- Maintain full motion
 - Isotonic Strenghtening
 - Rotator Cuff
 - Scapular Stabilizers
 - Deltoid, Biceps, Triceps
 - Rhythmic Stabilization
 - Basic
 - Intermediate
 - Advanced



Phase III: 8-12

Goals:

- Increase neuromuscular control (especially in apprehension position)
- Progress dynamic stability
- Increase overall strength
 - Continue to progress previous isotonic exercises
 - Begin dynamic stabilization
 - Basic
 - Intermediate
 - Advanced
 - Introduce basic plyometrics
- In Athletes begin to work ER/IR in 90° AB

Phase IV: Return to Activity

Goals:

Progressively increase activities to patient for full functional return

- Continue previous isotonic strengthening program
- Advance plyometrics
 - Instruct in maintenance program prior to discharge