## Non-Operative Rehabilitation for Posterior Shoulder Instability

Name:	Date:
Diagnosis:	Date of Surgery:
Phase I -Acute Phase	
• Goals:	
<ul> <li>Decrease pain,</li> </ul>	/inflammation
	on-painful ROM
<ul> <li>Retard muscle</li> </ul>	atrophy
<ul> <li>Decrease Pain/Inflam</li> </ul>	
<ul> <li>Therapeutic m</li> </ul>	odalities (ice, heat, electrotherapy, etc.)
<ul><li>NSAIDs</li></ul>	
<ul> <li>GENTLE joint i</li> </ul>	nobilization
<ul> <li>ROM Exercises</li> </ul>	
o Pendulum	
o Rope and pulle	·y
o L-Bar	
■ Flexion	
■ Abduct	ntal abduction
	al rotation
Strength Exercises	ai i otation
o Isometrics	
■ Flexior	1
• Abduct	
<ul><li>Extens</li></ul>	
<ul><li>Extern</li></ul>	al rotation
<ul><li>*Weight Shifts</li></ul>	(closed chain exercises)
	on that may place stress on the posterior capsule such as excessive internated for horizontal adduction
Phase II -Intermediate F	'hase
• Goals:	
o Regain and im	prove muscular strength
<ul> <li>Normalize arth</li> </ul>	irokinematics
<ul> <li>Improve neuro</li> </ul>	omuscular control of shoulder complex
<ul> <li>Criteria to Progress to</li> </ul>	Phase II:
<ul><li>Full ROM</li></ul>	
<ul> <li>Minimal pain a</li> </ul>	and tenderness
<ul> <li>Initiate Isotonic Streng</li> </ul>	gthening
<ul> <li>Flexion</li> </ul>	
o Abduction to 9	<u> </u>
o External rotati	
	on (from external rotation to 0 degrees)
<ul> <li>Supraspinatus</li> </ul>	

 $\circ$  Extension

o Push-ups

o Horizontal abduction (prone)

- Initiate Eccentric (surgical tubing) Strengthening
  - External rotation (from 0 degrees to full external rotation)
  - o Internal rotation (from full external rotation to 0 degrees)
- Normalize Arthrokinematics of Shoulder Complex
  - Continue joint mobilization
  - Patient education of mechanics of activity/sport
- Improve Neuromuscular Control of Shoulder Complex
  - o Initiate proprioceptive neuromuscular facilitation
  - Rhythmic stabilization drills
- Continue Use of Modalities (as needed)
  - o Ice, electrotherapy modalities, etc.

## Phase III -Advanced Strengthening Phase

- Goals:
  - Improve strength/power/endurance
  - o Improve neuromuscular control
  - Prepare athlete for activity
- Criteria to Progress to Phase III
  - o Full non-painful ROM
  - o No palpable tenderness
  - Continued progression of resistive exercises
- Continue use of modalities as needed
- Continue anterior capsule stretch
- Continue isotonic/eccentric strengthening
- Emphasize PNF
- Initiate Isokinetics
  - Flexion/extension
  - o Abd/adduction
  - Internal/external rotation
  - o Horizontal Abd/adduction
- Initiate plyometric training
  - Surgical tubing
  - o Medicine ball
  - o Wall push-up
- Initiate Military Press

## Phase IV -Return to Activity

- Goals:
  - Maintain optimal level of strength/power/endurance
  - Progressively increase activity level to return patient/athlete for full functional return to activity/sport
- Criteria to Progress to Phase IV
  - o Full ROM
  - No pain or tenderness
  - Satisfactory clinical exam
  - Satisfactory isokinetic test
- Continue all exercises as in Phase III
- Initiate and progress to interval program as needed

Comments:		
Frequency: times per week	Duration: weeks	
Signature	Date	