



Brian Waterman M.D.
ORTHOPEDIC SURGERY

MULTIDIRECTIONAL INSTABILITY PT PROTOCOL

Name: _____ **Date:** _____

Diagnosis: _____

Date of Surgery _____

Frequency: 1 2 3 4 times/week Duration: 1 2 3 4 5 6 Weeks

Weeks 0-6:

- Slingshot / Gunslinger Brace for 6 weeks
- Isometrics in brace, gentle supported Codman exercises
- PROM only for 6 weeks
- Grip strengthening, elbow ROM, wrist ROM

Weeks 6-12:

- Sling at night, can discontinue using the sling during the day
- AROM only as tolerated to increase ROM; no PT stretching or manipulation
- Restrict to 140° FF/ 40° ER at side/ IR to stomach/ 45° Abduction
- Scapular stabilization exercises avoiding anterior capsule stress
- Begin light isometrics for rotator cuff and deltoid, with arm at the side
- Can begin stationary bike

Months 3-12:

- Advance strengthening as tolerated: isometrics - bands - light weights (1-5 lbs); 8-12 reps/2-3 set per exercise for rotator cuff; deltoid, and scapular stabilizers
- Only do strengthening 3x/week to avoid rotator cuff tendonitis
- If ROM lacking, increase to full with gentle passive stretching at end ranges
- Begin eccentric motions, plyometrics (ex. Weighted ball toss), and closed chain exercises at 16 weeks
- Begin sports related rehab at 4 ½ months, including advanced conditioning
- Return to throwing at 6 months
- Throw from pitcher's mound at 9 months
- No collision sports allowed
- MMI is usually at 12 months

Comments:

Functional Capacity Evaluation Work Hardening/Work Conditioning Teach HEP

Modalities:

Electric Stimulation Ultrasound Iontophoresis Phonophoresis
 TENS Heat before/after Ice before/after Trigger points massage
 Therapist's discretion
 Other _____

Signature: _____ **Date:** _____