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Sports Medicine and Shoulder Service

Shoulder Instability / MDI Non-operative Rehab Protocol Prescription

Patient Name:

Date:

Diagnosis: *Shoulder instability / MDI L / R shoulder*

Number of visits each week: 1 2 3 4

Treatment duration _____ weeks

Initial Rehab Phase (if acute traumatic dislocation)

Sling immobilizer should be weaned off as tolerated

Correction of postural abnormalities

Glenohumeral and scapulothoracic joint mobilizations

Focus on scapulothoracic and glenohumeral rhythm

Exercises may include (but not limited to)

Range of motion exercises

Scapular isometrics

Pain-free submaximal deltoid isometrics

Manual scapula side-lying exercises

Internal/external rotation isometrics in modified neutral (submaximal, pain-free)

Modalities as needed

Daily HEP

Advancement Criteria

Normal scapulohumeral rhythm

Minimal pain and inflammation

IR/ER strength 5/5

Full upper extremity ROM

Subacute Rehab Phase

Evaluate and correct any core strength deficits

Strengthening

Scapular stabilizer, rotator cuff and core body strengthening exercise program

Assess and correct any substitution patterns

Daily HEP

Maintenance Phase

Continue strengthening program with progressive increase in resistance

Functional and sport specific training

Address trunk and lower extremity demands

Activity-specific plyometrics program

Progressive home or gym program for strengthening and endurance

Phase out supervised rehab

Advance home strengthening program to be done daily

ADDITIONAL COMMENTS: _____

Concerns or questions:

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Physician Signature: