



# Brian Waterman, MD

SPORTS MEDICINE & ORTHOPEDICS

## 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: \_\_\_\_\_