

Capsulorrhaphy for Multidirectional Instability Protocol



Name: _____ Date: _____

Diagnosis: _____

Date of Surgery: _____ Frequency: _____ times per week | Duration: _____ weeks

Week 0-6:

- » Slingshot/Gunslinger Brace for 6 weeks
- » Isometrics in brace
- » Elbow, wrist, and hand ROM
- » Grip strengthening, elbow ROM, wrist ROM

Weeks 6-12:

- » Sling at night, can discontinue using the sling during the day
- » Discontinue use of brace completely by 8 weeks
- » 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 for conditioning

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
- » Strengthen surgical shoulder no more than 2-3x/week to avoid rotator cuff tendonitis
- » If ROM lacking, emphasize 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 (and other overhead sports) at 6 months
- » Throw from pitcher's mound at 9 months
- » No collision sports allowed

Additional:

- ☐ Teach HEP ☐ Work Hardening/Work Conditioning ☐ Functional Capacity Evaluation

Modalities:

- ☐ Ice or cryotherapy before/after ☐ Heat before/after ☐ Electric Stimulation ☐ TENS ☐ Ultrasound
- ☐ Trigger points massage ☐ Dry needling ☐ Therapist's discretion

Signature: _____ Date: _____

Want to learn more? Find relevant videos, animations, and research material by orthopaedic surgeon Dr. Anthony Romeo at **anthonyromeomd.com**. ➔

