Dr. Pathik Shah
Sports, Revision Sports and Regenerative Sports Orthopaedic Surgeon
DNB Ortho (Mumbai), MNAMS (New Delhi), MBBS
AOSSM Sports Surgery Fellowship (California, USA),
Fellowship in Joint and Trauma (Mumbai)
Diploma in Football medicine (FIFA)

ANTERIOR INSTABILITY REHAB FRAMEWORK FOR NON-OPERATIVE MGMT / PHYSICAL THERAPY PRESCRIPTION

Diagnosis: Anterior Shoulder Instability PROGRESS THROUGH

EACH PHASE AS PATIENT MEETS GOALS

PHASE I:
__ Sling prn if initial episode, Gradual remobilization
__ Elbow Active / Active-Assisted ROM: Flexion and Extension
__ Hand, Wrist, Gripping exercises
__ Modalities, Cryocuff / Ice, prn

PHASE II:
__ Active-Assisted / Passive ROM to improve forward flexion in Scapula plane (pulley exercises, wand exercises, pool)
__ Pendulum exercises
__ Deltoid, Rotator cuff isometrics in plane of Scapula
__ PRE's for Scapular muscles, Latissimus, Biceps, Triceps
__ Joint mobilization (posterior glides)

PHASE III:
__ Active ROM to restore full ROM below horizontal
__ Restore Scapulohumeral rhythm
__ Joint mobilization
__ Scapular stabilization avoiding Anterior Capsule stress
__ IR and limited arc ER below the horizontal plane
__ Begin limited arc isotonic deltoid exercises in the plane of the Scapula

PHASE IV:
__ Restore full ROM in all planes
__ Progress PRE's for cuff and Scapular muscles, protecting capsule
__ Emphasize rhythmic Scapular stabilization and eccentric strengthening program
__ Begin endurance activities (UBE)

PHASE V:
__ Eliminate strength deficits and maintain flexibility
__ Isokinetics in modified neutral / plane of Scapula
__ Begin plyometric training program for throwers
__ Advanced proprioceptive training program
__ Continue with endurance activities

PHASE VI:
__ Isokinetic test
__ Begin throwing / racquet program
__ Return to full activity