

ARTHROSCOPIC CAPSULAR SHIFT FOR MDI

****Do not do any stretching of the capsule until at least 10 – 12 weeks out and only if necessary. AAROM is preferred**

Phase I - Protection Phase (Weeks 0 - 6)

Goals:

- Allow healing of sutured capsule
- Begin early protected ROM
- Retard muscle atrophy
- Decrease pain and inflammation

Weeks 0 – 2:

- Precautions:
 - Sleep in immobilizer for 4 weeks
 - No overhead activities for 6 weeks
 - Wean from sling after 4 weeks
- Elbow/hand/forearm/cervical spine ROM
- Hand gripping exercises
- AAROM (T-bar, pendulum):
 - Flexion to 90⁰
 - ER to at abduction
- Shoulder isometrics (sub-maximal, pain-free)
- Pain control modalities

Weeks 2 - 4:

- AAROM:
 - Flexion to 90°
 - ER to 30° at abduction
 - IR to at abduction
- Strengthening:
 - Initiate scapular program
 - Initiate tubing ER/IR with arm at side
- Continue pain control modalities

Weeks 5 – 6:

- AAROM:

- Flexion to 120°
- ER to 60° at 45° abduction
- IR to 30° at 45° abduction
- Strengthening:
 - Initiate light isotonic program below 90°
 - Continue tubing at side and scapular strengthening

Phase II - Intermediate Phase (6 - 12 weeks)

Goals:

- Full non-painful ROM by 10-12 weeks
- Normalize arthrokinematics
- Increase strength
- Improve neuromuscular control

Weeks 7 - 10:

- AAROM :
 - Flexion to tolerance
 - ER/IR to tolerance at 45° abduction
 - Progress ER/IR to tolerance at 90° abduction
- Strengthening:
 - Progress isotonic dumbbell program 1#/week if good form
 - Progress scapular strengthening program

Weeks 10 – 12:

- Continue ROM/flexibility exercises
- Begin joint mobilization/stretching and, self-capsular stretches as needed
- Strengthening:
 - Begin machine exercises for rhomboids, latissimus dorsi, biceps, and triceps
 - Initiate isokinetic IR/ER at modified neutral
 - Isokinetic strength test for IR/ER in neutral (60/180/300 deg/sec) at week 12

Phase III- Dynamic Strengthening Phase (12-20 weeks)

Goals:

- Improve strength, power, and endurance
- Improve neuromuscular control
- Prepare athlete to begin throwing

Criteria to Enter Phase III:

- Full, nonpainful ROM (patient must fulfill this criteria)
- No pain or tenderness
- Strength 70% or more of contralateral side

Weeks 12 – 16:

- Continue flexibility/stretching program
- Strengthening:
 - Continue isotonic dumbbell program
 - Continue isokinetic strengthening at sport specific speeds
 - Diagonal patterns (and)
 - Initiate closed chain push-up progression
- Initiate plyometric program (begin 2 handed and progress to 1 handed)

Weeks 17 – 20:

- Continue all exercises
- Initiate interval sport program (throwing program)

Phase IV - Return to Activity (20-24 weeks)

Goal:

- Progressive increase in activities to prepare for full functional return

Criteria to Progress to Phase IV:

- Full ROM
- No pain or tenderness
- Isokinetic test that fulfills criteria to throw/return to sport
- Satisfactory clinical exam

Weeks 20 – 24:

- Continue strengthening program
- Continue plyometric program
- Continue interval sport program and progress throwing to off mound
- Gradual return to sport/functional activities

Criteria for return to play:

- Physician approval
- Satisfactory ROM
- Satisfactory strength test
- Satisfactory completion of interval sport program