

Capsular Shift/Multidirectional Instability Rehabilitation

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Diagnosis: Right / Left Capsular Shift/Multidirectional Instability Repair_____

Date of Surgery: _____

Weeks 0-6 (Phase I):

- Sling with abduction for 6 weeks
- Isometrics in brace, gentle supported Codman exercises
- PROM only for 6 weeks

Range of Motion Goals

	Wk 0-2	Wk 3-4	Wk 5-6
Passive forward elevation	90°	120°	145°
Passive external rotation	0°	20°	45°
Internal rotation	Buttock	L3	T12
Cross chest adduction	----	Neutral	20°

- Grip strengthening, elbow ROM, wrist ROM
- Encourage home exercises 5x/day

Weeks 6-12 (Phase II):

- Can discontinue using the sling
- AROM only as tolerated to increase ROM; no PT stretching or manipulation
- 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 (Phase III):

- 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 1/2 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