

Arthroscopic Anterior and Posterior (MDI) Stabilization Protocol

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Post-Op Weeks 0-4:

ROM: A/AAROM stretch to neutral ER with arm adducted and 140 degrees forward flexion, IR as tolerated

Immobilizer: Worn at all times except for hygiene and exercises

Therapeutic exercises: Elbow/wrist/hand ROM, grip strengthening, isometric abduction, ER/IR exercises with elbow at side.

Post-Op Weeks 4-6:

ROM: Increase forward flexion as tolerated, and adducted/abducted ER limited to 40 degrees

Immobilizer: Discontinue

Therapeutic exercises: Advance isometrics in phase I to use of a Theraband, continue with elbow/wrist/hand ROM and grip strengthening, begin prone extensions, and scapular stabilizing exercises, gentle joint mobs

Post-Op Week 6-12:

No push-ups or pushing movements

ROM: Gradual ROM for IR behind back, IR at 90° abduction and horizontal adduction. Progress to full active motion in all other planes without discomfort

Therapeutic exercises: Advance Theraband exercises to use of weights, continue with and progress exercises in phase II, begin upper body ergometer

Post-Op Week 12 to 6 months:

Continue to avoid excessive or forceful horizontal adduction and internal rotation

ROM: Full without discomfort

Therapeutic exercises: Advance exercises in phase III, begin functional progression to work/sport, return to previous activity level

Guidelines: Patient is required to complete stretching exercises 3 times per day

Patient may return to the weight room at 4-6 months, if appropriate

Patient may return to competitive sports, including contact sports, by 6 months, if cleared by surgeon