

POSTERIOR/MULTIDIRECTIONAL SHOULDER DISLOCATIONS

General Considerations:

- 1-6 weeks with arm held at side in slight extension and neutral or external rotation
- Immobilized 4-6 weeks

Phase I (0-6 weeks)

- Avoid excessive and painful flexion with internal rotation
- No horizontal adduction or distal stress to humerus (i.e. holding heavy weight)
- Begin passive and active-assisted ROM to maintain mobility of glenohumeral structures
- Maintain strength in the scapulothoracic musculature by performing manual resistance in anatomic and diagonal planes and rhythmic stabilization
- Maintain rotator cuff strength by performing submaximal, pain-free, multi-angle isometrics

Phase II (6-12 weeks)

- Posterior glide is contraindicated; if internal rotation is limited use grade III mobilizations in the plane of the glenoid fossa with arm abducted to 55 degrees and horizontally adducted to 30 degrees
- Progress strength and endurance exercises, particularly infraspinatus/teres minor complex
- Be particularly careful with active and resisted exercises in the 70-100 degree arc of flexion
- Do not begin in full internal rotation when strengthening external rotators
- Adequate rotator cuff strength should be present before proceeding with overhead flexion

Phase III (12-18 weeks)

- Progress dynamic strengthening exercises of both the GH and scapular stabilizers
- Perform functional activities; eccentrics as well as concentric activities
- Discharge with maintenance program

Functional Outcome:

- Return to full function except for limitations intentionally imposed by surgical procedure