



NONOPERATIVE SHOULDER DISLOCATION PROTOCOL  
Rehab Guidelines

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If you have any questions about this protocol or about the patient, do not hesitate to email Dr. Metzler at: [ametzler@orthonky.com](mailto:ametzler@orthonky.com)

First Time Dislocators: May be immobilized for 3-4 weeks before starting physical therapy.

Recurrent Dislocators: Physical therapy can begin immediately

**Phase I: 0-4 weeks (typically)**

**Goals:**

Re-establish full motion - avoid abduction and external rotation for 4-6 weeks.

Retard muscular atrophy

Decrease pain and inflammation

Allow capsular healing - d/c sling week 3-4 depending on symptoms

- AAROM with wand to tolerance
- Begin IR/ER at side, progress to 30degrees, 60 degrees then 90 degrees AB as pain subsides
- Submax isometrics for all shoulder musculature
- Gentle joint mobs & PROM
- Modalities PRN (ice, IFC-Estim etc . . . ) to decrease inflammation and pain

**Phase II: 4-8 weeks**

**Goals:**

Increase dynamic stability

Increase strength

Maintain full motion

- Isotonic Strenghtening  
Rotator Cuff  
Scapular Stabilizers

Deltoid, Biceps, Triceps

- Rhythmic Stabilization
  - Basic
  - Intermediate
  - Advanced

### **Phase III: 8-12**

#### **Goals:**

Increase neuromuscular control (especially in apprehension position)

Progress dynamic stability

Increase overall strength

- Continue to progress previous isotonic exercises
- Begin dynamic stabilization
  - Basic
  - Intermediate
  - Advanced
- Introduce basic plyometrics
- \*In Athletes begin to work ER/IR in 90 degrees AB

### **Phase IV: Return to Activity**

#### **Goals:**

Progressively increase activities to patient for full functional return

- Continue previous isotonic strengthening program
- Advance plyometrics
- Instruct in maintenance program prior to discharge