

Palmetto Health USC

ORTHOPEDIC CENTER

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THERMAL ASSISTED CAPSULORRAPHY (For Atraumatic Congenital Instability)

I. PHASE I - PROTECTION PHASE (0-8 weeks)

Goals: Allow healing of tightened muscle
Begin early protected motion of the elbow, wrist, and hand
Decrease pain/inflammation

Weeks 0-2

Precautions:

- Sleep in immobilizer/sling for 28 days
- No overhead activities for 12 weeks
- Avoid abduction, flexion and external rotation

Exercises:

- Gripping exercises with pulley
- Elbow flexion/extension and pronation/supination
- AROM cervical spine
- After 10 days, active abduction may be allowed, but is not to exceed 90°

Weeks 2-4

Goals: Gradual increase in range of motion
Normalize arthrokinematics
Improve strength
Decrease pain/inflammation

Range of Motion Exercises:

- active assisted exercises (pulley and L-Bar)
- forward flexion to 90°
- abduction to 90°
- ER to 45° at 0° and 90° of abduction
- extension to 20°
- IR to 45°

Weeks 6-8

Range of motion exercise

- L-Bar active assisted exercises
- Initiate self-capsular stretches
- Continue joint mobilization
- Gradually increase range of motion to full by week 12

Strengthening exercises

- Continue all exercises listed above
- Initiate isotonic dumbbell and tubing program
 - side lying external rotation
 - side lying internal rotation
 - shoulder abduction
 - supraspinatus
 - latissimus dorsi
 - rhomboids
 - biceps curl
 - triceps curl
 - shoulder shrugs
 - push-ups
 - prone scapular stabilizations
 - throwers 10

Continue neuromuscular control exercises for scapulothoracic joint

Weeks 8-12

- Continue with all exercises listed above
- Continue with joint mobilizations and self-capsular stretches

III. PHASE III - DYNAMIC STRENGTHENING PHASE (Weeks 12-20) **Advanced Strengthening Phase**

Goals: Improve strength/power/endurance
Improve neuromuscular control
Prepare the athlete to begin to throw

Criteria to Enter Phase III

1. Full non-painful range of motion
2. No pain or tenderness
3. Strength 70% or greater compared to the contralateral side

Emphasis of Phase III

- 🏰 High speed, high energy strengthening exercises
- 🏰 Eccentric exercises
- 🏰 Diagonal patterns

Exercises

- 🏰 Throwers ten exercises
- 🏰 Continue tubing exercises for ER/IR
- 🏰 Tubing for rhomboids
- 🏰 Tubing for latissimus dorsi
- 🏰 Tubing for biceps
- 🏰 Tubing for diagonal patterns D2 extension
- 🏰 Tubing for diagonal patterns D2 flexion
- 🏰 Continue dumbbell exercises for supraspinatus and deltoid
- 🏰 Continue serratus anterior strengthening exercises push-ups floor
- 🏰 Continue trunk/lower extremity strengthening exercises
- 🏰 Continue neuromuscular exercises
- 🏰 Continue self-capsular stretches
- 🏰 Gradual return to recreational activities

IV. PHASE IV - RETURN TO ACTIVITY (Weeks 20-28)

Goal: Progressively increase activities to prepare patient for full functional return

Criteria to Progress to Phase IV:

- 🏰 Full range of motion
- 🏰 No pain or tenderness
- 🏰 Isokinetic test that fulfills criteria
- 🏰 Satisfactory clinical exam

Exercises:

- 🏰 Initiate interval throwing program
- 🏰 Continue tubing exercises as listed in Phase III
- 🏰 Continue range of motion exercises

Initiate interval throwing program between weeks 22-26