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Non-Operative Treatment of Multidirectional Instability (MDI) Protocol

General Guidelines:

- Focus on rhomboids, trapezius, levator, and deltoid
- Retrain scapular muscles before initiating glenohumeral strengthening
- Perform exercises pain free. Progression through a particular phase and movement to next phase is contingent on achieving scapular and glenohumeral joint motor-control pain free for a full set of one exercise
- Hold exercises for 3 seconds. Begin with motor relearning (3x20, 2x/day), then endurance training(3x10-15, 2x/day), then strength portion (4x8-12, every second day).

Phase I: Retrain scapular motor control

- Scapular upward rotation/elevation drills in standing

Phase II: Control arcs of motion in 0-45° elevation

- Yellow-red theraband
- Patient standing: extension rows (from 45° flexion to neutral), ER (0-45 ER) at 0° abduction, IR (0-45° IR) at 0 abduction

Phase III: Improve posterior shoulder musculature

- Green Theraband
- Standing bent over rows
- Side-lying ER
- Standing Theraband rows

Phase IV: Improve control of scapula with flexion (sagittal plane)

- Yellow-green Therabands
- Patient standing flexion with therabands and weights

Phase V: Control increasing arcs of motion (45-90° elevation)

- Yellow-green Therabands
- ER at 90°, IR at 90°, Flexion at 90°

Phase VI: Improve strength of 3 portions of deltoid

- Patient standing: bent-over rows, supine and sitting flexion, short-level abduction 45-60°

Phase VII: Sport-specific

- Load depends on functional demands of athlete
- Gradual return to sport or function activities (partial practice to full)