# Kai Mithoefer, MD

New England Center for Regenerative Orthopedics and Sports Medicine Boston Sports and Shoulder Center 840 Winter Street, Waltham, MA 02451, (781) 890-2133 125 Parker Hill Avenue, Boston, MA 02120, (617) 264-1100

# POSTOPERATIVE REHABILITATION GUIDELINES ARTHROSCOPIC ANTERIOR BANKART REPAIR

The following protocol is intended as a general guideline for physical therapist, athletic trainer, and patient after a anterior Bankart repair. These guidelines are designed to facilitate the expedited and safe return to athletic or professional activity and is based on a review of the current scientific principles of a anterior Bankart repair. For the treating health care provider this protocol should not serve as a substitute for individualized clinical decision making during the patient's post-operative course but should rather take into consideration the individual's physical findings, progression, and possible post-operative limitations. If the therapist or patient requires assistance or encounters any postoperative complication they should consult with **the surgeon.** 

Physical Therapy to Start in first week after surgery.

# <u>Phase I - Immediate Post-Surgical Phase</u>

#### Precautions:

- 1. No Lifting of Objects
- 2. No Excessive Shoulder Motion Behind Back
- 3. No Excessive Stretching or Sudden Movements
- 4. No Supporting of Body Weight by Hands

#### Week 0-3

- Sling Usage
  - 24/7 except for showers and exercise
- PROM Guidelines For Shoulder
  - Flex to 90 degrees
  - Abduction to 90 degrees
  - ER to Neutral
  - IR to Sacrum/30 degrees
- Daily Exercises 4-5x/day
  - Elbow flexion/extension
  - Pendulums
    - Flexion
    - Circles
  - Pulleys within PROM Guidelines
  - Cardiovascular Exercise

- Stationary Bike Only
- ICE PRN

### Week 3-4

- Sling Usage
  - Discontinue Sling at start of 4th week for awake hours
  - Continue with sling until end of 4<sup>th</sup> week for sleeping
- PROM Guidelines
  - Flex to 180 degrees
  - Abduction to 180 degrees
  - IR to 70 degrees at 90 degrees Abduction
  - ER to Neutral
- Strengthening
  - Isometric flexion/extension/IR/ER/abd
  - Scapular retractions with theraband
- Start AAROM
- UBE at NO Resistance
- Continue with elbow and wrist ROM and Gripping exercises
- Ice for pain PRN

#### Phase II

#### **Precautions:**

- 1. No Heavy Lifting of Objects
- 2. No Supporting of Body Weight by Hands & Arms
- 3. No Sudden Jerking Motions

## Weeks 5-10:

- Continue all exercises above
- PROM
  - ER to 25 degrees until end of week 6 then continue as tolerated
  - No restrictions on Flex/abduction/IR
- Achieve Full AROM by end of 9<sup>th</sup> week
- Increase strengthening
  - Sidelying ER
  - RTC strengthening with Theraband
  - Prone Rowing
  - Initiate Scapular Muscular Strengthening

- Lower traps
- Prone Thumbs up/down
- Posterior/Inferior joint mobs for pain control
- Cardiovascular
  - Elliptical without Arms at 6wks
    - Ok to add arms at 8wks
  - Treadmill at 6wks
- ICE PRN

## Phase III: Strengthening

#### Week 10-16

- Continue to progress above exercises
- Maintain Full Active and Passive ROM
- Begin biceps curls with weights
- Progress Shoulder Strengthening Exercises
  - RTC strengthening at 90 Degrees abduction
  - Plyometric ball toss
  - PNF patterns
  - Below the shoulder light weight lifting
- Start easy throwing program at week 12
  - Should take 8 weeks to complete
- Return to sport except Football/Rugby/Wrestling/Kayaking
- ICE PRN

#### Week 17-24

- Continue to increase strengthening
- Continue with throwing program
- Start Sport Specific training beyond throwing program
- Return to All Sports