

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 + SLAP 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.

Phase I - Immediate Post-Surgical Phase

Precautions:

1. No Lifting of Objects
2. No IR behind back first 4 weeks
3. No Excessive Stretching or Sudden Movements
4. No Supporting of Body Weight by Hands
- 5. No cross chest adduction first 4 weeks**
- 6. No revisited biceps work 8 weeks**

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 scapular plane
- 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 6th 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 9th 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