



## Rehab Protocol for Arthroscopic Bankart Repair

The Bankart procedure is performed to increase anterior stability of the shoulder. The following is a guideline for progression of post-operative treatment.

### General Information

- Time required for full recovery is 9-12 months.
- There may be a loss of external rotation when compared to the other side, but the motion is usually adequate for most activities.
- Accelerating rehabilitation for “fast healers” may inhibit results and lead to recurrent problems.

### Precautions

- In this procedure, the repair must be protected for 6 weeks. During this time, strengthening activities involving internal rotation must be avoided.
- The repair is stressed with external rotation. Since the repair is made with the arm in neutral rotation, external rotation must be limited during the early rehab period.

### Immobilization

- Sling should be worn for the first 48-72 hours
- After 3 days, sling can be removed for light activity
- Sling can be worn as needed during the day; it should always be worn at night for the first 6 weeks
- Discontinue sling completely at 6 weeks
- Do not get incision wet

### 1st POST-OP VISIT

(1) Wound inspection

(2) Patient education

- **No active shoulder motion for 4 weeks, all planes**
- **No active internal rotation for 6 weeks**
- Sling use as directed by physician
- Icing 3 times/day for 20 minutes

(3) Exercise

- Pendulum exercise without weight
  - Clockwise
  - Counterclockwise
  - Side-to-side
  - Front & back
- AAROM exercise - to patient tolerance - with cane
  - Flexion
  - Abduction
  - **External rotation to 20° only**
- AROM exercise
  - Elbow flexion/extension



- Wrist flexion/extension and supination/pronation
- (4) Ice
- (5) Modalities - PRN

### 1 WEEK POST-OP

- (1) Wound check
- (2) Exercise
  - Pendulum exercise
  - AAROM exercise - to patient tolerance - with cane
  - Isometric exercise
    - Flexion/extension
    - Abduction
    - External rotation
  - Progressive resistive exercise
    - Shoulder shrugs
    - Bicep curls
    - Triceps/shoulder extension
    - Scapular retraction - prone
    - Wrist supination/pronation
    - Gripping exercises
    - Wrist flexion/extension
- (3) Grade I/II glenohumeral joint mobilization - as indicated
- (4) Modalities - PRN
- (5) Ice

### 2 WEEKS POST-OP

- (1) Wound check, sutures out
- (2) Exercise
  - AAROM
    - UBE, forward/reverse
    - With cane - progress to finger ladder/wall climbs/pulley system
  - Pendulum exercise with light weight
  - Isometrics - as previous
  - Progressive resistive exercise - as previous
- (3) Grade I/II glenohumeral joint mobilization - as indicated
- (4) Modalities - PRN
- (5) Ice

### 4 WEEKS POST-OP

- (1) Scar mobility
- (2) Exercise
  - AROM
    - All planes - **limit ER to 20°**
    - UBE, forward/reverse
  - Progressive resistive exercise - continue as previous, adding:
    - Serratus punch - supine, without weight



- Body Blade
  - One-handed grip in neutral position
  - Two-handed grip in front
  - Opposite hand diagonal pattern

(3) Grade I/II glenohumeral joint mobilization - as indicated

(4) Modalities - PRN

(5) Ice

### 6 WEEKS POST-OP

(1) Discontinue sling use

(2) Exercise

- AROM
  - All planes - **limit external rotation to 45°**
  - UBE, forward/reverse and standing off to side clockwise and counterclockwise
- Progressive resistive exercise - continue as previous, adding:
  - Shoulder internal/external rotation with low resistance Theraband (limit ER to 45°)
  - Wall push-up plus, hand in neutral position

(3) Grade I/II glenohumeral joint mobilization - as indicated

(4) Modalities - PRN

(5) Ice

### 8 WEEKS POST-OP

(1) Full PROM, ER to 60°

(2) Exercise

- Progressive resistive exercise - continue as previous, adding:
  - Low resistance/high repetition
    - Flexion
    - Abduction
    - Supraspinatus (limit to 70°)
    - Prone fly
    - Scapular retraction Prone extension
  - Kneeling push-ups
  - Wall push-up plus, hands in neutral position
- Body Blade
  - One-handed grip, abduction to 90°
  - Two-handed grip, flexion to 90°
- Plyoball
  - Circles - CW and CCW, 1 minute each direction
  - Squares - CW and CCW, 1 minute each direction

(3) Grade I/II glenohumeral joint mobilization - as indicated

(4) Modalities - PRN

(5) Ice

### 10 WEEKS POST-OP

(1) Full PROM, ER to 75°



(2) Exercise

- Progressive resistive exercise - continue as previous, adding:
  - Push-up
  - Step-up push-up in quadruped position
- Plyoball diagonal patterns
- Fitter
  - Side-to-side
  - Front & back
- StairMaster in quadruped (level 12-15)
- Treadmill in quadruped (1.0 mph)
- Progress weight and range of motion as tolerated by patient, with closed- and open-chain exercises and proprioceptive activities

(3) Glenohumeral joint mobilization - as indicated

(4) Modalities - PRN

(5) Ice

### 12 WEEKS POST-OP

(1) Should have full AROM, ER to 90°; if not, begin passive stretch to achieve full ROM

(2) Exercise

- Progressive resistive exercise - continue as previous, adding:
  - Body Blade diagonals - progress to single-leg stance
  - Push-up plus in push-up position
  - Step-ups in push-up position

(3) Glenohumeral joint mobilization - as indicated

(4) Modalities - PRN

(5) Ice

### 16 WEEKS POST-OP

(1) Should have full AROM, ER to 90°; continue passive stretch to achieve full ROM

(2) Exercise

- Continue with exercise program, progressing with weight & endurance as tolerated
- Begin sport-specific exercise as directed by physician (see attached sheet)
- Isokinetic testing as directed by physician

(3) Grade I/II glenohumeral joint mobilization - as indicated

(4) Modalities - PRN

(5) Ice

### 24 WEEKS POST-OP

Progression to full activity as directed by physician