



Arthroscopic Anterior Stabilization (Bankart) Repair Rehabilitation Program

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Diagnosis: Right / Left Bankart Repair _____

Date of Surgery: _____

Week 0-1:

- Sling at all times except during home exercise program and hygiene
- Home exercise program 3 times daily
- The Cryo/Cuff/ice should be used during this phase to control pain and swelling
- Sutures will be removed at 7-14 days and patient will begin formal rehabilitation

Week 1-4:

- Restrict motion to 90° FF/ 20° ER at side/ IR to stomach/ 45° ABD, PROM → AAROM → AROM as tolerated
- Hold cross-body adduction until 6 weeks post-op
- Isometrics in sling
- Sling for 3-4 weeks
- Heat before/ice after PT sessions at therapist discretion

Week 4-8:

- D/C sling @week 3-4. Normal use of the involved extremity for ADLs is encouraged within reason (no overhead lifting, repetitive activities, or fast-jerking motions).
- It should be strongly encouraged that the patient's main focus in this phase of rehabilitation is to restore range of motion and that strengthening is secondary.
- Increase AROM 160° FF/ 45° ER at side/ 160° ABD/ IR behind back to waist
- Strengthening (isometrics/light bands) within AROM limitations, horizontal abduction exercises
- Also start strengthening scapular stabilizers (traps/rhomboids/lev. scap/etc)
- Modalities per therapist discretion
- Emphasis must be made on proper scapular stabilization and control. Accurate assessment of the scapular stabilizing musculature strength and flexibility is critical to proper shoulder function.
- The patient may begin light impact activities (i.e. jogging, easy agilities) at the end of this phase

Weeks 8-12:

- If ROM lacking, increase to full with gentle passive stretching at end ranges
- Advance strengthening as tolerated: isometrics → bands → light weights (1-5 lbs); 8-12 reps/2-3 set per rotator cuff, deltoid, and scapular stabilizers

Arthroscopic Bankart Repair

Weeks 12-48:

- Only do strengthening 3x/week to avoid rotator cuff tendonitis
- Begin UE ergometer
- Begin eccentrically resisted motions, plyometrics (ex weighted ball toss), proprioception (ex body blade), and closed chain exercises at 12 weeks.
- Begin sports related rehab at 3 months, including advanced conditioning/weight training
- Push-ups at 4 ½ - 6 months
- Return to throwing at 4 ½ months. This timeframe is highly unpredictable and will vary greatly between each individual patient.
- Throw from pitcher's mound at 6 months
- Bracing may used for return to contact or collision sports up to 6 months
- MMI is usually at 12 months

For more information please visit: www.tsaog.com/druelle