## Arthroscopic Anterior Stabilization (Bankart) Repair Rehabilitation Program

### Nicholas M. Capito, MD

## Diagnosis: Right/Left Shoulder Bankart Repair

Date of Surgery: \_\_\_\_\_

Range of	of Mo	tion (	Goals
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	Wk 0-2	Wk 3-4	Wk 5-6
Passive forward elevation	90°	120°	145°
Passive external rotation	0°	20°	45°
Internal rotation	Buttock	L3	T12
Cross chest adduction		Neutral	20°

### Week 0-5:

- >> Focus on passive ROM goals
- >> Isometric deltoid (anterior, middle, posterior) start week 2-4.
- >> Scapular stabilization (rhomboid, trapezius, serratus anterior) start week 2-4.
- >> Heat before/ice after PT sessions at therapist discretion
- >> D/C sling @ week 5.

# Week 5-12:

>> 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 active 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
- >> Continue 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 10wks

# Weeks 12-48:

>> Advance strengthening as tolerated: isometrics  $\rightarrow \rightarrow$  bands  $\rightarrow \rightarrow$  light weights (1-5 lbs); 8-12 reps/2-3 set per rotator cuff, deltoid, and scapular stabilizers

- >> Only do strengthening 3x/week to avoid rotator cuff tendonitis
- >> Progress to eccentrically resisted motions, plyometrics (ex weighted ball toss), proprioception (ex body blade), and closed chain exercises
- >> Progress to sports related rehab including advanced conditioning/weight training
- >> Push-ups at  $4 \frac{1}{2} 6$  months
- >> Return to throwing at 4 1/2 months. This timeframe is highly unpredictable and will vary greatly between each individual patient.

- >> Throw from pitcher's mound at 6 months
  >> Bracing may be used for return to contact or collision sports up to 6 months
  >> MMI is usually at 12 months