Bankart Repair Protocol

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 3-6 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**
  - Capsular repair becomes stressed with external rotation. Since the repair is made with the arm in neutral rotation, external rotation must be limited during early rehabilitation.
  - If procedure is performed arthroscopically strengthening of the rotator cuff muscles can begin early and progress quickly.
  - If procedure is performed as an “Open Repair”, the subscapularis may be detached for exposure of the glenohumeral joint and then reattached after the repair is complete. This reattachment must be protected for 6 weeks. During this time, strengthening activities involving internal rotation must be avoided.

- **Immobilization**
  - Sling should be worn for 6 weeks in uncontrolled environments (around dogs, kids, in crowds, etc.).
  - Sling should be worn while sleeping for 6 weeks.
  - Sling may be removed in controlled environments for light activity.
  - Discontinue sling completely at 6 weeks.

- **Personal Hygiene / Showering**
  - Avoid getting incision/portal sites wet for 48 hours.
  - Ok to begin showering 48 hours after surgery (if no wound related issues).
  - DO NOT remove steristrips.
1st POST-OP VISIT / 0 WEEKS POST-OP

1. Wound Inspection
2. Patient Education
   - **NO active internal rotation until 2 weeks post-op**
   - Full ROM to tolerance, **limit external rotation at 30° of abduction to 20° and flexion to 90°**.
   - Sling use as described above
   - Icing 3 times/day for 20 minutes each
3. Exercises
   - Pendulum (begin Day 1) with 10° forward lean
     - clockwise
     - counterclockwise
     - side-to-side
     - front & back
   - PROM and AAROM exercises to tolerance within limitations of Flexion to 90° and External Rotation to 20° in 30° abduction
     - flexion with rope & pulley and/or cane/bar (begin Day 3)
     - internal rotation with rope & pulley and/or cane/bar (begin Day 3)
     - **external rotation to 20° only**
     - Isometric exercises - submaximal (begin Day 3)
       - flexion / extension
       - abduction
       - external rotations
       - **No internal rotation**
     - AROM exercises at elbow and wrist
       - elbow flexion / extension
       - wrist flexion / extension and pronation / supination
4. Modalities - PRN
5. Ice

1 WEEK POST-OP

1. Wound inspection
2. Exercises
   - PROM and AAROM exercises to tolerance
     - **flexion to 90°** (Day 7)
     - **external rotation limit to 20° in 30° of abduction**
   - Pendulum (continue as previous)
   - Isometric exercises (continue as previous)
   - Progression resistive exercises to tolerance
     - bicep curls
     - triceps / shoulder extensions
     - wrist flexion / extension
     - wrist pronation / supination
     - gripping exercises
     - shoulder shrugs
     - prone scapular retraction
3. Grade I/II glenohumeral joint mobilization - as indicated
   - **no anterior glides until 8 weeks post-op**
4. Modalities - PRN
5. Ice
2 WEEKS POST-OP
1. Wound inspection, remove sutures
2. Exercises
   - PROM and AAROM exercises to tolerance
     - flexion to 90°
     - external rotation limit to 20° in 30° of abduction
     - begin Upper Body Ergometer forward / reverse
   - Pendulum exercises with light weight
   - Isometric exercises (continue as previous)
   - Progressive resistive exercises
     - continue as previous
     - begin internal rotation with arm at side (initiating from neutral) using light theraband resistance
     - begin supine serratus press no weight
     - begin theraband row with scapular retraction
     - begin scaption to 90°
3. Grade I/II glenohumeral joint mobilizations - as indicated
   - no anterior glides until 8 weeks post-op
4. Modalities - PRN
5. Ice

3 WEEKS POST-OP
1. Exercises
   - PROM and AAROM
     - flexion to tolerance
     - external rotation limit to 20° in 30° of abduction
   - Progressive resistive exercises (continue as previous)
2. Grade I/II glenohumeral joint mobilization - as indicated
   - no anterior glides until 8 weeks
3. Modalities - PRN
4. Ice

4 WEEKS POST-OP
1. Exercises
   - AROM
     - permit full ROM to tolerance, except extreme abduction and external rotation
   - Progressive resistive exercises
     - begin external rotation with arm at side (avoid extreme external rotation) using theraband resistance
     - begin flexion using theraband resistance
   - BodyBlade
     - one-handed grip in neutral position
     - two-handed grip in front
     - opposite hand diagonal pattern
2. Grade I/II glenohumeral joint mobilization - as indicated
   - no anterior glides until 8 weeks post-op
3. Modalities - PRN
4. Ice
5 WEEKS POST-OP
1. Exercises
   - AROM
     - external rotation at 90° of abduction to tolerance
     - Progressive resistive exercises (continue as previous)
     - BodyBlade (continue as previous)
2. Grade I/II glenohumeral joint mobilization - as indicated
   - no anterior glides until 8 weeks post-op
3. Modalities - PRN
4. Ice

6 WEEKS POST-OP
1. Discontinue sling use
2. Exercises
   - AROM
     - Add Upper Body Ergometer standing off to the side clockwise and counterclockwise
     - goal of full AROM 6-8 weeks post-op
     - Progressive resistance exercises (continue as previous), adding:
       - internal and external rotation with dumbbells
       - deltiod and supraspinatus strengthening with dumbbells
       - diagonal strengthening using theraband
       - wall push-ups, hand in neutral position
3. Grade I/II glenohumeral joint mobilizations - as indicated
   - no anterior glides until 8 weeks post-op
4. Modalities - PRN
5. Ice

8 WEEKS POST-OP
1. Exercises
   - AROM as tolerated, should have full AROM by 6-8 weeks post-op
   - Progressive resistance exercises (continue as previous), adding:
     - kneeling push-ups
   - BodyBlade
     - one-handed grip, abduction to 90°
     - two-handed grip, flexion to 90°
   - Plyoball
     - circles, clockwise and counterclockwise, 1 minute each direction
     - squares, clockwise and counter clockwise, 1 minute each direction
2. Grade I/II glenohumeral joint mobilization - as indicated
   - no anterior glides until 8 weeks post-op
3. Modalities - PRN
4. Ice
10 WEEKS POST-OP
1. Exercises
   - Progressive resistance exercises (continue as previous), adding:
     - push-ups
     - step-up push-up in quadruped position
     - Internal and external rotation exercises in 90° abduction/90° elbow flexion
       using theraband/tubing
     - Plyoball diagonal patterns
   - Fitter
     - side-to-side
     - front & back
   - Stairmaster in quadruped (level 12-15)
   - Treadmill in quadruped (1.0 mph)
   - Progress resistances as tolerated by patient
2. Grade glenohumeral joint mobilization - as indicated
3. Modalities - PRN
4. Ice

12 WEEKS POST-OP
1. Exercises
   - Progressive resistive exercises (continue as previous), adding:
     - push-up plus in push-up position
     - step-up in push-up position
     - BodyBlade diagonals - progress to single-leg stance
     - **Begin sport specific activities once full motion, normal strength, and no dyskinesis**
2. Grade glenohumeral joint mobilization - as indicated
3. Modalities - PRN
4. Ice