

# VCU Sports Medicine Clinic

## Bankart repair protocol

---

This protocol is designed to serve as a patient guide to rehabilitation after a Bankart repair procedure. Time frames allow for the optimal healing, and should be used as criteria for advancement along with a patient's functional ability.

### Phase I (weeks 0-6)

#### Goals

1. Decrease pain and inflammatory response
2. Protect repair; educate patient regarding postoperative precautions
3. Begin limited passive range of motion, progressing to full at end of phase
4. Independent with home exercises

#### Precautions

1. Wear sling at all times for four weeks except elbow range of motion
2. No shoulder range of motion for four weeks, then gradual return to full range of motion (no external rotation stretching unless directed by physician)
3. No Codman's

#### Exercises (week 0-4)

1. Initiate cervical spine, elbow, wrist and hand active range of motion
2. Shoulder retraction activation including manual scapula strengthening and isolate scapula strengthening
3. Modalities as needed for pain

#### Exercises (weeks 4-8)

1. Passive range of motion for flexion and abduction in scapular plane, and internal rotation as tolerated (no passive external rotation stretching)
2. Initiate active assistive range of motion with T-bar, table slides, Swiss ball, pulleys, etc.
3. Initiate active range of motion gradually, without restrictions
4. Light proprioceptive neuromuscular facilitation (PNF) techniques and kinesthetic awareness drills
5. Initiate scapular stabilization activities both open and close chain
6. Trunk stabilization activities

### Phase II (weeks 8-12)

#### Goals

1. Eliminate shoulder pain
2. Achieve full range of motion
3. Assure normal scapulohumeral rhythm

#### Precautions

No resisted strengthening until eight weeks post-op. Start with exercise bands — no free weights for 12 weeks. Emphasize high reps/low resistance.

#### Exercises

1. Full range of motion (if not achieved then aggressive passive range of motion for elevation and internal rotation/external rotation as directed by physicians); if full motion, then stretch as needed to maintain mobility

2. Initiate exercise back strengthening
3. Initiate light dynamic stabilization/plyometric activities
4. Gradually integrate functional patterns, increase speed of movements, increase endurance

### **Phase III (weeks 12-24)**

#### **Goals**

1. Pain-free return to full activities with normal shoulder girdle strength
2. Continue strengthening with increased weights, endurance and speed (may begin adding free weights to program as indicated)
3. Late in phase (as indicated): weight room with elbow not past posterior plane of glenohumeral joint
4. Progress plyometric program light to heavy
5. Possible return to most sports activities after four months as directed or approved by physicians

#### **Exercises**

1. Continue strengthening scapula/shoulder/trunk
2. Simulate sports-specific activities: tennis, golf, baseball as appropriate
3. Initiate internal throwing program three to four weeks after completing plyometric program