

Posterior Bankart Repair Protocol

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

General Information

- Time required for full recovery is 4-6 months.
- There may be a loss of internal 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.

Immobilization

- External rotation brace with large pillow is worn for 4 weeks. When this brace is removed the hand should be in a hitchhike position (elbow extended, palm facing front, thumb pointed away from the body). **The hand should not cross in front of the body.** The sling may be removed after the block has worn off when the patient is in controlled environments (watching TV, working at a desk) as long as the hand is kept out and away from the front of the body.
- After **4 weeks** the patient may use a regular sling and the hand can come in front of the body. The patient **should not** reach behind his/her back.
- After **6 weeks** no sling is required.

Personal Hygiene / Showering

- Avoid getting incision/portal sites wet for 48 hours; the dressing may be removed at this time. DO NOT remove steristrips.
- Ok to begin showering 72 hours after surgery (if no wound related issues).
- Avoid baths, hot tubs, and swimming until 3 weeks after date of surgery

1st POST-OP VISIT / 0 WEEKS POST-OP

1. Wound Inspection
2. Patient Education
 - Icing 3 times/day for 20 minutes each
3. Exercises
 - Pendulum without weight – performed with elbow extended and the arm externally rotated, forearm supinated (in the hitch-hike position)
 - clockwise
 - counterclockwise
 - side-to-side
 - front & back
 - AAROM exercises to patient tolerance – Cane/Pulleys
 - flexion
 - abduction

- external rotation
- **NO internal rotation**
- AROM exercises
 - elbow flexion / extension
 - wrist flexion / extension and pronation / supination
 - scapular retraction/shrugs (seated or standing **in sling**)
- 4. Modalities - PRN
- 5. Ice

1 WEEK POST-OP

1. Wound inspection
2. Exercises
 - AAROM exercises to patient tolerance – Cane/Pulley
 - Pendulum (continue as previous)
 - Isometric exercises
 - flexion / extension
 - abduction
 - external rotation
 - Progression resistive exercises to tolerance
 - bicep curls
 - triceps / shoulder extensions
 - wrist flexion / extension
 - wrist pronation / supination
 - gripping exercises
 - shoulder shrugs / scapular retraction (seated / standing in sling)
3. Grade I/II glenohumeral joint mobilization - as indicated
 - **no posterior glides until 8 weeks post-op**
4. Modalities - PRN
5. Ice

2 WEEKS POST-OP

1. Wound inspection, remove sutures (if not already performed by surgeon)
2. Exercises
 - AAROM exercises to tolerance
 - begin Upper Body Ergometer forward / reverse
 - Cane / Pulleys – progress to finger ladder / wall climbs
 - Pendulum exercises with light weight
 - Isometric exercises (continue as previous)
 - Progressive resistive exercises (continue as previous)
3. Grade I/II glenohumeral joint mobilizations - as indicated
 - **no posterior glides until 8 weeks post-op**
4. Modalities - PRN
5. Ice

4 WEEKS POST-OP

1. Change external rotation brace to regular sling
2. ROM goals
 - forward elevation / flexion to 120°
3. Scar mobility

4. Exercises
 - AROM
 - all planes
 - Upper Body Ergometer forward / reverse
 - Progressive resistive exercises
 - continue as previous, adding:
 - serratus punch
 - BodyBlade
 - one-handed grip in neutral position
 - two-handed grip in front
 - opposite hand diagonal pattern
5. Grade I/II glenohumeral joint mobilization - as indicated
 - **no posterior glides until 8 weeks post-op**
6. Modalities - PRN
7. Ice

6 WEEKS POST-OP

1. Discontinue sling use
2. ROM goals
 - forward elevation / flexion to 160°
3. Begin internal rotation stretches
 - towel stretch
 - sleeper stretch
4. Exercises
 - AROM
 - all planes
 - Add Upper Body Ergometer standing off to the side clockwise and counterclockwise
 - Progressive resistance exercises (continue as previous), adding:
 - internal and external rotation with low resistance
 - wall push-ups, hand in neutral position
5. Grade I/II glenohumeral joint mobilizations - as indicated
 - **no posterior glides until 8 weeks post-op**
6. Modalities - PRN
7. Ice

8 WEEKS POST-OP

1. ROM goals
 - full ROM with all movements
 - continue gentle passive stretching if not at full ROM
2. Exercises
 - Progressive resistance exercises (continue as previous), adding:
 - low resistance / high repetition:
 - flexion
 - abduction
 - supraspinatus (limit to 70°)
 - scapular retraction
 - prone extension / rows

- 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
- 3. Grade I/II glenohumeral joint mobilization - as indicated
 - **no posterior glides until 8 weeks post-op**
- 4. Modalities - PRN
- 5. Ice

10 WEEKS POST-OP

1. Full ROM
 - increase intensity of stretching / PROM in not at full ROM
2. Exercises
 - Progressive resistance exercises (continue as previous)
 - progress weight and range of motion as tolerated by patient, with closed-chain exercises, open-chain exercises, and proprioceptive activities
 - Plyoball diagonal patterns
 - Fitter
 - side-to-side
 - front & back
3. Grade glenohumeral joint mobilization - as indicated
4. Modalities - PRN
5. Ice

12 WEEKS POST-OP

1. Should have full ROM
2. Exercises
 - Progressive resistive exercises (continue as previous)
 - BodyBlade diagonals - progress to single-leg stance
3. Grade glenohumeral joint mobilization - as indicated
4. Modalities - PRN
5. Ice

16 WEEKS POST-OP

1. Should have full ROM
2. Exercises
 - Progressive resistive exercises
 - continue with exercise program, progressing with weight and endurance as tolerated
 - **Begin sport specific activities once full motion, normal strength, and no dyskinesia**
3. Grade glenohumeral joint mobilization - as indicated
4. Modalities - PRN
5. Ice

Return to Sport Criteria

1. ROM WNL
2. Normal strength
3. Satisfactory clinical exam