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PT Protocol - Arthroscopic Bankart Repair

General Principles

- Protect the surgical repair while progressively restoring motion.
- Prioritize controlled ROM before introducing strengthening.
- Avoid provocative positions that stress the anterior capsule (especially abduction with external rotation).

Phase I: Protection Phase (Weeks 0–5)

Precautions

- No lifting, pushing, or pulling with the operative arm.
- Avoid combined abduction and external rotation.
- Respect ROM limits; do not force end-range motion.
- No use of upper body ergometer, hand weights, or Body Blade.

Immobilization

- Sling for 4 weeks, worn continuously (day and night), except for bathing, dressing, and therapy sessions.

Therapy Focus

- Begin PROM at 1 week post-op within limits:
  - Weeks 1–3: ≤ 90° forward flexion, ≤ 20° ER at side.
  - Weeks 4–6: ≤ 135° forward flexion, ≤ 45° ER at side.
- Scapular mobility: elevation, depression, protraction, retraction.
- AROM for hand and wrist.
- Elbow AROM unless a biceps tenodesis was performed (then restrict).
- Gentle submaximal isometrics for rotator cuff (arm at side) as tolerated.

Phase II: Active Range of Motion (Weeks 6–12)

Precautions

- Continue to avoid abduction/ER positions and high-stress anterior capsular loads.
- No end-range stretching.
- Do not perform push-ups, military press, pec flys, or bench press during this stage.
- No UBE, weights, or Body Blade until cleared.

Therapy Focus

- Discontinue sling at 4 weeks.
- Progress to AROM, while advancing PROM:
  • By 8 weeks: ≤ 150° forward flexion, ≤ 45° ER at side, ≤ 90° abduction.
  • By 12 weeks: gradual progression to full passive motion.
- Begin light strengthening (isometrics → bands) with arm at side.
- Gradually introduce horizontal abduction and scapular stabilization (trapezius, rhomboids, latissimus).

Phase III: Advanced Strengthening (3 months and beyond)

Precautions

- Progress gradually to avoid overstressing repair.
- Delay return to contact sports until at least 6 months.

Therapy Focus

- Progress to full AROM with gentle end-range stretching.
- Emphasize high-repetition, low-load strengthening; gradually increase resistance, weight, and speed.
- Start rotator cuff and scapular work at waist level, progressing to higher angles as tolerated.
- Avoid early long-lever strengthening (e.g., empty can with elbow extended). Introduce these only in later phases.
- Monitor for subacromial bursitis symptoms during strengthening — allow adequate recovery between sessions.
- Begin eccentrics, plyometrics, proprioception, and closed-chain stability at ~12 weeks.
- Sports-specific drills and advanced conditioning:
  • 3–4 months: functional strengthening, early sports prep.
  • 4–5 months: interval sports progression (golf, tennis, basketball, volleyball).

Modalities

- Heat and Ice, Ultrasound, Iontophoresis, Phonophoresis, Therapists' discretion, TENS

Learn More About Your Condition:

Visit Dr. Myerson's website to learn more about your condition:

www.lucasmyersonmd.com