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OPEN BANKHART REPAIR PROTOCOL

This rehabilitation protocol has been developed for the patient following an open Bankart surgical procedure. The open Bankart repair progresses more aggressively than the arthroscopic procedure due to fixation methods. The protocol is divided into phases. Each phase is adaptable based on the individual and special circumstances. Immediately post-operatively, exercises must be modified so as not to place unnecessary stress on the anterior joint capsule of the shoulder.

Early passive range of motion is highly beneficial to enhance circulation within the joint to promote healing.

The **overall goals** of the surgical procedure and rehabilitation are to:

- Control pain and inflammation
- Regain normal upper extremity strength and endurance
- Regain normal shoulder range of motion
- Achieve the level of function based on the orthopedic and patient goals

The physical therapy should be initiated within one week following surgery. The supervised rehabilitation program is to be supplemented by a home fitness program where the patient performs the given exercises at home or at a gym facility.

Important post-operative signs to monitor include:

- Swelling of the shoulder and surrounding soft tissue
- Abnormal pain response, hypersensitive-an increase in night pain
- Severe range of motion limitations
- Weakness in the upper extremity musculature

Return to activity requires both time and clinical evaluation. To most safely and efficiently return to normal or high level functional activity, the patient requires adequate strength, flexibility, and endurance. Functional evaluation including strength and range of motion testing is one method of evaluating a patient's readiness to return to activity. Return to intense activities following an open Bankart repair requires both a strenuous strengthening and range of motion program along with a period of time to allow for tissue healing. Symptoms such as pain, swelling, or instability should be closely monitored by the patient.

PHASE ONE: Weeks 1-3

EXERCISE GOAL

RANGE OF MOTION

Gradual Increase

Passive and AAROM

Flexion/Elevation 0-120° wk 3

Passive and AAROM-scapular plane

External rotation 0-30° wk 3

Internal rotation as tolerated

Pendulum exercises

Rope/Pulley (flex, scaption, abd)

Wand exercises-all planes within limitations

Posterior capsule stretch

Manual stretching and Grade I-II joint mobs

STRENGTH

Initiate submaximal isometrics-PAIN FREE

BRACE

Brace to 3 weeks or as noted by Dr. Stewart

Brace removed for exercises above



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PHASE ONE: Weeks 1-3 (cont'd)

EXERCISE GOAL

MODALITIES:

E-stim as needed

Ice 15-20 minutes

GOALS OF PHASE ONE:

- Promote healing of tissue
- Control pain and inflammation
- Gradual increase in ROM
- Independent in HEP
- Initiate muscle contraction

PHASE TWO: Weeks 3-6

RANGE OF MOTION:

Gradual Increase

Passive and AAROM

Flexion/Elevation 0-140° wk 4

0-160° wk 6

Passive and AAROM-scapular plane

External rotation 0-75° wk 6

Internal rotation Full ROM wk 6

Pendulum exercises

Posterior capsule stretch

Rope/Pulley (flex, scaption, abd)

Wand exercises-all planes within limitations

Manual stretching and Grade II-III joint mobs

STRENGTH

Continue isometric activities as in Phase 1

Initiate supine rhythmic stabilization at 90° flexion

Initiate UBE for endurance

Initiate plyometric chest pass

Initiate IR/ER at neutral with tubing

Initiate flexion, scaption, empty can

Prone horizontal abduction (100°, 90°), extension

Push-up progression

Initiate sidelying ER, triceps, biceps

Initiate scapular stabilizer strengthening

Concentrate on eccentric activities

BRACE

Discharge brace end of week 3

MODALITIES

Ice 15-20 minutes

GOALS OF PHASE:

- Control pain and inflammation
- Enhance upper extremity strength
- Gradual increase in ROM

OPEN BANKHART REPAIR PROTOCOL

PHASE THREE: Weeks 6-12

RANGE OF MOTION

Continue all ROM activities from previous 8-10 wks phases

Posterior capsule stretch

Towel stretch

Manual stretching and Grade III-IV joint mobs

STRENGTH

Continue all strengthening from previous phases, increasing resistance and repetitions

Initiate overhead plyotoss at weeks 10-12

Progress with ER at 90° abduction with tubing

UBE for strength and endurance

Progress rhythmic stabilization activities to include

standing PNF patterns with tubing

Initiate isokinetic IR/ER at neutral at wk 10-12

MODALITIES

Ice 15-20 minutes

GOALS OF PHASE THREE:

- Minimize pain and swelling
- Reach full ROM
- Improve upper extremity strength and endurance
- Enhance neuromuscular control
- Normalize arthrokinematics

PHASE FOUR: Weeks 12-24

Continue with all ROM activities from previous phases

Posterior capsule stretching

Towel stretching

Grade III-IV joint mobs as needed for full ROM

STRENGTH

Progress strengthening program with increase in resistance and high speed repetition

Progress with eccentric strengthening of posterior cuff and scapular musculature

Initiate single arm plyotoss

Progress rhythmic stabilization activities to include standing PNF patterns with tubing

UBE for strength and endurance

Initiate military press, bench press, and lat pulldowns

Initiate sport specific drills and functional activities

Initiate interval throwing program week 16

Initiate light plyometric program week 12-16

Progress isokinetics to 90° of abduction at high speeds

MODALITIES

Ice 15-20 minutes

GOALS OF PHASE FOUR:

- Full ROM
- Maximize upper extremity strength and endurance
- Maximize neuromuscular control
- Initiate sports specific training/functional training