

# ARTHROSCOPIC BANKART REPAIR-EARLY Motion

# Revised October 2012

# \*IMMOBILIZATION/ BRACE:

- Immobilizer brace x 4 to 6 weeks.
- Use at all times when up and about and when sleeping. Remove for exercises and if supported on pillows while sitting or reclining when awake.

# \*ROM GOALS:

- 1<sup>st</sup> 4 weeks:
  - o Supported Pendulums and "rock the baby" exercises.
  - o Passive and assisted Flex to 90', ABd 60', ER to 30' (arm at side).
- Weeks 4-6: Increase Flexion 140; ABd 100-120'; ER to 45'; full IR.
- Weeks 6-8:
  - Progress Passive and Active Assisted ROM:
    - Flexion FULL.
    - Abduction to 140.
    - ER to 60
    - Should maintain full IR.
- Weeks 8 and beyond:
  - o Progress to FULL Abduction.
  - o Maintain Full Flexion and IR.
  - o Progress ER to 75 by 10 -12 weeks then slowly to FULL ER after 12 weeks
  - AVOID forced ER or Abduction + ER ROM/ stretches.

\*SPECIAL PRECAUTIONS/ LIMITATIONS: G/H JOINT ROM may be restricted and limited more or less than described above depending on additional surgical findings/ procedures and/or surgeon preference.



# **REHABILITATION PROGRAM:**

# PHASE 1- weeks: 0-4

RANGE OF MOTION: 3-4x / day

- Passive and Active Assisted ROM exercises within the ROM limits set above: using over door passive ROM Pulley device for flexion, scaption, Abduction and IR; and supine WAND exercises for flexion, Abduction and limited ER.
- Supported Pendulum and "rock the baby" exercises.
- Active motion of elbow, wrist and hand.

# STRENGTHENING: 3-4x/day;

- sub maximal, multiplanar shoulder **isometrics** done in neutral position (10-25 reps, 1-2 sets, can progress resistance as tolerated but not to maximal)
- Scapular retraction/shrug exercises.
- Gripping ex's and AROM elbow.

# PHASE II- weeks: 4-6:

RANGE OF MOTION: 2-3x/day

- 1) Progress Passive and Active Assisted ROM exercises within the ROM limits set above using WAND supine, overhead pulley, self assist with well arm in supine, and assist by PT clinic as needed.
- 2) continue supported Pendulum and "rock the baby".
- 3) IR stretch

# STRENGTHENING: 2-3 sets daily; 10-25 reps

Continue above-- **ADD**:

- AROM supine scaption and Abduction slides w/o weight.
- Rubber Tubing -IR, ER to 30', Rows, and Ext.to neutral.
- "Ball on Wall" scapular stabilization below shoulder level.

# **CONDITIONING: UBE**

• Start with gentle **forward** motion and light resistance.



# PHASE III- weeks 6--8:

#### **RANGE OF MOTION:**

- Continue above within increased limits.
- Gentle posterior capsular stretches as needed.
- Assisted passive ROM gently as needed.

# STRENGTHENING: ADD:

- Rubber Tubing Scaption "Plus" protraction (in scapular plane) to 90'
- **UBE**: Progress to forward and backward at about 6 weeks increase as tolerated minimal to moderate resistance and time.

# PHASE IV- WEEKS 8-12:

#### **RANGE OF MOTION:**

- o Progress to FULL ABDuction.
- o Maintain Full Flexion and IR.
- Progress ER to 75 by 10 -12 weeks then slowly to FULL ER after 12 weeks.
- AVOID forced ER or ABDuction + ER ROM/ stretches.

# STRENGHTENING: ADD:

# 1) Hand Weights -

RC and Shd. girdle isotonic exercises with light weight and high repetitions (start with the weight of the arm and slowly increase at  $\sim 1$  lb. increments to  $\sim 5$  lbs.) start  $\sim 15$  reps working up to 30 reps);

- **SIDE ER** with pillow under elbow
- **PRONE** "Y's" and "T's"; extension to neutral
- SIT/ STAND- scaption (to 90' in scapular plane).
- 2) Cable pulley weights- Rows, extensions, front Pull downs, IR, ER.
- 3) "Closed Chain" / Scapular Stabilization progression: inclined / Wall push-ups (avoid elbow past shoulder level); "ball on wall", weight bearing over gym ball, wobble board, Vew–Do board etc., and weight shifting 'step ups" (should avoid these positions if any multidirectional/posterior instabilities noted).



- 4) Plyoball--progress to two handed forward chest pass, overhead pass
- 5) Body Blade progressions

**CONDITIONING**: increase UBE time and resistance/ interval training- both directions.

# PHASE V: beyond 12 weeks:

# STRENGTHENING:

- 1) Continue **Hand weight** exercises in a progressive resistive manner.
- 2) Progress to regular push-ups.
- 3) Consider more advanced weight training at gym with modifications if given the clearance of the surgeon and guidance of the Physical therapist.
- 4) Advance to UE Functional training program as tolerated.

**CONDITIONING:** continue UBE. May start swimming using breast stroke.

**Return to activity/ Duty:** usually at 4-6 months with return of strength and stability.