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 Physical Therapy Clinic
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**Rehab Practice Guidelines for:
 Bankart Repair**

Primary surgery: Repair of Bankart lesion

Precautions: Avoid "high 5 / low 5" position

Notes: Patients will only be seen before 4 weeks if there are range of motion limitations.

Expected # of visits: 11-29

<u>Week 1</u>	Treatment	Milestones
No formal PT Use sling 24 hrs/day No driving	Ice shoulder for pain and inflammation control Remove sling TID for Codman's exercises	Comfortably sleep through the night
<u>Weeks 2-4</u> Begin PT 1-3 visits/week Sling use in crowds and uncontrolled situations TOTAL VISITS 3-9	Modalities for pain and inflammation control as needed Incision mobilization Test glenohumeral accessory motions <i>if hypomobile</i> - Rx: grade III/IV mobilizations <i>if normal mobility</i> - Rx: grade I/II mobilizations for pain control and to prevent adhesions AROM and PROM exercises in all planes only to restrictions stated in milestones Initiate isometric strengthening Initiate scapular control exercises	No hypomobility or hypersensitivity of the scars AROM/PROM: IR: full in plane of scapula ER: 45° in plane of scapula Flex/ABD: 90° pure plane 120° across midline Horiz ADD: full Ext: to plane of the body Full gleno-humeral joint mobility (e.g. inferior and posterior glides)
<u>Weeks 5-6</u> D/C use of sling 1-3 visits/wk TOTAL VISITS 5-15	Progress ROM to milestones Continue strengthening - progress exercises from isometric to isotonic	AROM/PROM: ER: 60° in plane of scapula Flex/ABD: 135° pure plane Ext: to 20° beyond the plane of the body Full horizontal adduction

<p><u>Weeks 7-8</u></p> <p>1-3 visits/wk</p> <p>TOTAL VISITS 7- 21</p>	<p>Continue to progress strengthening exercises</p> <p>Dynamic stabilization exercises</p> <p>Initiate plyometrics (2 handed)</p> <p>May initiate isokinetics in neutral</p>	<p>Maintains full ROM for flexion, abduction, and IR.</p> <p>When 70° ER achieved hold on progressing. If a thrower, stop at 90°.</p> <p>Independent with home exercise program</p> <p>Strength increasing</p>
<p><u>Weeks 9-12</u></p> <p>1- 2 visits/wk</p> <p>TOTAL VISITS 11-29</p>	<p>Progress strengthening program</p> <p>Progress plyometrics to 1 handed</p> <p>Progress isokinetics to 45° ABD</p>	<p>MMT 5/5 all shoulder motions</p>
<p><u>Weeks 16-26</u></p> <p>Physical therapy is as needed for sport/work specific activities</p>	<p>Begin interval throwing program (if appropriate)</p> <p>Progression of sport/work specific rehabilitation</p>	<p>Return to sport/work</p>