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PHYSICAL THERAPY PROTOCOL

# Bankart Repair — Anterior Shoulder Stabilization

Arthroscopic anterior labral / capsulolabral repair

The anterior labrum and capsule have been repaired to restore stability. Early rehabilitation protects the repair by limiting external rotation and the combined abduction/external-rotation ("apprehension") position.

## General Precautions

- Sling for 4–6 weeks.
- Limit external rotation to 0–30° (arm at side) for the first 4 weeks.
- Avoid the combined abduction + external rotation position and shoulder extension behind the body.
- No weight bearing through the arm for 6 weeks.

## Phase I — Protected Motion Weeks 0-4

### Goals

- Protect the anterior repair
- Control pain
- Begin protected passive motion

### Precautions / Restrictions

- Sling at all times except exercise/hygiene
- ER limited to 30° at the side
- No abduction/ER apprehension position
- No active ER, extension, or abduction against resistance

### Exercises & Interventions

- Pendulums
- Passive forward flexion to ~90–120°
- Passive ER to 30° at the side
- Elbow/wrist/hand motion
- Sub-maximal deltoid and cuff isometrics (avoid ER/extension)
- Scapular setting

### Criteria to Advance

- Repair protected 4 weeks
- Passive flexion ~120°

## Phase II — Progressive Motion Weeks 4-8

### Goals

- Restore near-full motion
- Wean sling

### Precautions / Restrictions

- Gradually progress ER; avoid forced end-range stretching

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- No apprehension position until 8 weeks

### Exercises & Interventions

- Discontinue sling by ~4–6 weeks
- Progress flexion to full
- Progress ER to ~45° then full by ~8–10 weeks
- Active range of motion in all planes
- Begin light rotator cuff and scapular strengthening

### Criteria to Advance

- Full flexion
- ER progressing toward full without apprehension

## Phase III — Strengthening Weeks 8–16

### Goals

- Restore full motion and strength
- Restore dynamic stability

### Exercises & Interventions

- Progressive resistive rotator cuff / scapular strengthening
- Rhythmic stabilization and proprioception
- Closed- then open-chain strengthening
- Full ER stretching once cleared

### Criteria to Advance

- Full symmetric motion
- Strength ≥80% of opposite side

## Phase IV — Return to Sport Months 4–6

### Goals

- Return to overhead and contact activity

### Exercises & Interventions

- Advanced strengthening and plyometrics
- Interval throwing / sport-specific progression
- Contact / collision drills as cleared

### Criteria to Advance

- Symmetric strength
- Full painless motion
- Return to contact sport typically ~6 months

*This protocol is a general guideline. Progression is criteria-based and may be advanced or slowed by Dr. O'Donnell based on intraoperative findings, tissue quality, fixation, and individual healing. Time frames are approximate. Direct questions to the office at (305) 393-8810.*