

**Protocol S8**  
**Physical Therapy Protocol for**  
**Arthroscopic Reverse Bankart Repair or**  
**Open Posterior Capsulorrhaphy**

**Phase I: Protection Phase (0-5 weeks)**

**GOALS:**

- Allow time for labral repair to heal.
- Gradually increase shoulder passive range of motion (ROM)

**ANCILLARY MEASURES:**

- Use pain medications as needed.
- Wear shoulder immobilizer for 5 weeks.
- Adjust immobilizer so that the bolster rests by the patient's side, not on the abdomen.
- May remove immobilizer for showering, dressing, exercises, and tabletop activities.

**EXERCISES:**

- **Elbow/Wrist/Hand ROM:** Active ROM (flexion and extension) of the elbow, wrist and fingers on the operated side is encouraged. Gripping exercises are allowed.
- **Codman's Pendulum:** Stand adjacent to a chair or table and bend slightly at the waist. Support your body weight by leaning on the chair or table with the opposite arm. Let the full weight of the operated arm hang freely. Gently swing the operated arm forward and back, side to side as tolerated for 15 seconds. Progress to 3-5 minutes. Repeat 3 times each day.
- **Range of Motion:** Shoulder passive and progressive active range of motion should increase slowly during the postoperative period according to the table below.

Weeks Postop	Forward Flexion	External Rotation
0-2	90°	10°
2-4	110°	20°
4-6	130°	30°
6-8	160°	45°
8-12	Full	Full*

\*Prefer 5° less than normal side.

**PRECAUTIONS:**

- Do not use operated arm to push off or to lift.
- Avoid increasing shoulder ROM too rapidly so that labral repair is not compromised.
- If open posterior capsular repair was done, then avoid shoulder active ROM during this phase of the protocol.
- Tabletop activities such as writing, dining and using the computer are permitted.

**Protocol S8**  
**Physical Therapy Protocol for**  
**Arthroscopic Reverse Bankart Repair or**  
**Open Posterior Capsulorrhaphy**

**Phase II: Motion Phase (6-10 weeks)**

**GOALS:**

- Continue to gradually increase shoulder range of motion as described below.

**ANCILLARY MEASURES:**

- Discontinue use of shoulder immobilizer.
- Apply ice as needed.
- Use analgesics as required.

**EXERCISES:**

- **Continue all Phase I exercises.**
- **Shoulder Range of Motion:** Begin shoulder active ROM and progress as tolerated in all planes of motion following the guidelines in the chart below.

Weeks Postop	Forward Flexion	External Rotation
0-2	90°	10°
2-4	110°	20°
4-6	130°	30°
6-8	160°	45°
8-12	Full	Full*

\*Prefer 5° less than normal side.

- **Stick exercises** may be initiated.
- **Overhead Pulley:** Secure overhead pulley in doorway. Grasp both handles. At first, pull down on the unoperated side while the operated shoulder is relaxed (passive motion). Progress to active motion of the operated shoulder as tolerated. Repeat 3 times per day, 10 repetitions.
- **Shoulder Isometrics:** Shoulder flexion, extension, and abduction isometrics are encouraged. Shoulder shrug exercise as tolerated.

**PRECAUTIONS:**

- Avoid reinjury to shoulder.
- No sports activities.
- Avoid heavy lifting.

**Protocol S8**  
**Physical Therapy Protocol for**  
**Arthroscopic Reverse Bankart Repair or**  
**Open Posterior Capsulorrhaphy**

**Phase III: Strengthening Phase (11-16 weeks)**

**GOALS:**

- Maintain full active, pain-free ROM.
- Increase muscular strength.
- Return to daily activities.

**ANCILLARY MEASURES:**

- Aggressive stretching before exercises.
- Apply ice after exercises, if needed.

**EXERCISES:**

- **Continue all Phase I and II exercises.**
- **Aggressive Stretching:** Self stretching may be helpful prior to strengthening exercises. Stretch in adduction (posterior capsule), external rotation and internal rotation (using towel or belt behind back) to maximize range of motion.
- **Isotonic Strengthening with Therabands:** Secure the theraband to a doorknob or hook so that you may stretch the band until you feel resistance. Start using low resistive theraband, 5 repetitions, 3 times per day. Gradually increase repetitions to achieve goal of 20 repetitions per exercise, 3 times per day. Then graduate to more resistive theraband and begin with 5 repetitions and repeat process, gradually increasing repetitions per exercise per day. Strengthening exercises should include shoulder flexion, extension, abduction, external rotation and internal rotation.
- **Isotonic Strengthening with Free Weights:** Progress to light free weights (not more than three pounds) after therabands have been used.

**PRECAUTIONS:**

- Avoid reinjury to shoulder.
- No sports activities.
- Avoid heavy lifting.

**Protocol S8**  
**Physical Therapy Protocol for**  
**Arthroscopic Reverse Bankart Repair or**  
**Open Posterior Capsulorrhaphy**

**Phase IV: Advanced Strengthening Phase (17-26 weeks)**

**GOALS:**

- Prepare for strenuous work activity
- Prepare for sports activity

**EXERCISES:**

- **Continue all Phase I and II exercises and Phase III strengthening** program outlined above on a daily basis. This may be done with or without the supervision of physical therapist.
- **Begin Sports Specific Exercises:** Interval rehabilitation programs for throwers and for golfers may be initiated if shoulder is pain free.

**PRECAUTIONS:**

- NO heavy overhead lifting or work.
- NO contact or strenuous sports.

**Protocol S8**  
**Physical Therapy Protocol for**  
**Arthroscopic Reverse Bankart Repair or**  
**Open Posterior Capsulorrhaphy**

**Phase V: Maintenance Phase (27+ weeks)**

**GOALS:**

- Return to strenuous work activity without restrictions
- Return to sports activity without restrictions

**EXERCISES:**

- Continue maintenance exercise program of isotonic strengthening 3 times per week. This is done without the assistance of a physical therapist.
- Continue sports specific exercise program as needed.

**PRECAUTIONS:**

- Avoid shoulder re-injury by common mechanisms such as overhead work and weight lifting.
- Use common sense and avoid painful activities or exercises.
- Discontinue sports activity if shoulder pain occurs.