



KEVIN P. MURPHY, MD

Board Certified Orthopedic Surgeon

Specializing in Sports Medicine and Arthroscopy

10475 Centurion Pkwy., Suite 220

Jacksonville, FL 32256

phone # 904-634-0640 fax # 904-634-0203

SHOULDER ARTHROSCOPY/BANKART REPAIR
PHYSICAL THERAPY PROTOCOL

Preoperative Guidelines

- Restore full AROM
- Strengthen involved extremity
- Educate Patient on post-op protocol

Note: Exercise prescription is dependent upon the tissue healing process and *individual* functional readiness in *all* stages. If any concerns or complications arise regarding the progress of any patient, physical therapy will contact the orthopedist

Phase I (Post-op Days 1 – 7)

- No extension past plane of the body x 4 weeks**
- No running**
- No ER > 0°**
- Sling: Wear always, even at night. Maintain ER at 0°
- Hand squeezing exercises
- Elbow and wrist AROM
- 2-Finger isometrics (but **No resisted rotation**)
- Shoulder shrugs and scapular retraction and protraction
- Supported pendulum exercises
- Supine assisted shoulder flexion—use other arm to raise affected shoulder to 90°
- Stationary bike
- Ice pack 20 mins 3x/day
- Sleep with pillow under arm for comfort

Goals: Pain control, normal scapular mobility, PROM for shoulder flexion to 90°

Phase II (Weeks 2 - 4)

- No extension past plane of the body x 4 weeks**
- No running**
- No ER > 0°**
- Continue sling while in public, but start to wean off

- Pendulum exercises
- Resisted elbow/wrist exercises (light dumbbell)
- Shoulder shrugs and scapular retraction and protraction
- Supine IR to 45° to 60° (w/arm abducted to 45°)
- Supine AAROM flexion and abduction to 90° only, progress to scapular plane
- 1-2 Finger isometrics: submaximal and pain free in all directions
- Continue stationary bike

Goals: Supine AAROM: Supine flex and abduction to 90°, Pain control

Phase III (Weeks 5 – 8)

- **No Running**
- Continue appropriate previous exercises
- AAROM: towel stretch, wand, pulley, wall climbs, etc. Do not “push through” any sharp, jabbing, or pinching” pain
- Light stretching into ER
- UBE: light resistance 10 minutes forward and 10 mins backward, increase resistance at 6 weeks
- Rotator Cuff exercises with Theraband: ER and IR at side flexion and scaption (thumb up) to 90°
- Scapular exercises: rows, shrugs and “push-out” exercises with Theraband, prone horizontal abduction at 90°
- Treadmill – Walking progression program
- Exercise bike, Stairmaster, Nordic Track, etc
- Pool exercises: jogging/shoulder ROM and gentle strengthening as above

Goals: 90% FAROM, pain free ADLs, at least 4/5 strength per MMT, 10 mins UBE without pain

Phase IV (Weeks 9-12)

- Continue appropriate previous exercises
- PROM as tolerated to restore near full functional ROM, aggressive stretching, GH Joint mobilizations prn
- UBE 15 min forward and 15 min back, gradually increase resistance
- Continue with Rotator cuff exercises: emphasis is on muscle fatigue every other day. Move progressively into higher shoulder ROM—bench press, military press in front of body
- Scapular stabilization and proprioception exercises:
 - Rows on Total Gym (arms at sides and at 45°)
 - Shrugs and Prone horizontal shoulder abduction (arm at 90°)
 - Small circle rotations with Ball against wall
 - Scapular protraction (push-up with a plus) against wall.
 - Rhythmic stabilization/perturbations
 - Body Blade
 - BAPS on all 4s
 - Plyoball progression
 - Fitter on hands
- Push-up progression: Wall to table to chair to knees (no elbow flexion >90 degrees)
- Functional Training (Under PT’s supervision...Must be pain free and no overhead):
 - Basketball—Dribble, pass and catch (no overhead), shooting in the key
 - Frisbee – throw and catch
 - Football catch and underhand throw

- Volleyball – bumping, setting, and underhand serve
 - Racquet swings: forehand and backhand...No overhead
- Treadmill running progression
- Stairmaster, Elliptical trainer, stationary bike
- Progress with Pool Exercises

Goals: Full Shoulder AROM, normal strength per MMT, 50 push-ups on knees

Phase V (Months 3 – 6)

- Continue Rotator Cuff and scapular PREs: 3x/week and into the higher ROMs, but not in “at risk positions”.
- Sports specific drills: dribbling, passing, catching, shooting, rebounding, etc.
- Throwing progression

Goals: Pain free throwing

No contact sports until 6 months post-op