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Arthroscopic Bankart/Anterior Capsulolabral Repair

Please follow the protocol along with the instructions listed on the patient's referral

Arthroscopic Bankart capsulolabral repair is usually performed to treat anterior inferior glenohumeral instability.

Patients are discharged with a sling and swathe. The swathe can be removed after the 3rd post-operative day. Patients wear a sling for a total of 4-5 weeks after surgery. Active use of the extremity is not permitted during this period. Range of motion is not pushed as aggressively as it is after an open repair because these patients do not routinely develop stiffness.

Please contact the physical therapy department at (401) 443-5000 if there are any questions. You may also refer to www.universityorthopedics.com and go to Dr. Green's section to view video of the specific shoulder exercises:

<http://www.universityorthopedics.com/physicians/green/prepost.html>

After the dressing is removed you may shower quickly and gently pat your shoulder dry with a clean towel. When in the shower you are to wear a sling to protect your shoulder from injury. If there is any drainage or concern about the healing of the incisions do not shower and just gently clean the surface of the shoulder with rubbing alcohol.

Week 0-6

No range of motion for 1st week after surgery.

During the 2nd week after surgery passive self-assisted supine forward elevation, supine external rotation, supine cross chest adduction, and standing internal rotation.

Range of Motion Goals

	Wk 0-2	Wk 3-4	Wk 5-6
Passive forward elevation	90°	120°	145°
Passive external rotation	0°	20°	45°
Internal rotation	Buttock	L3	T12
Cross chest adduction	----	Neutral	20°

Do not stretch beyond the listed goals of range of motion.

Isometric deltoid (anterior, middle, posterior) start week 2-4.

Scapular stabilization (rhomboid, trapezius, serratus anterior) start week 2-4.

Begin light active use after sling discontinued.

Week 6-12

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If ROM goals easily met stop passive self-assisted stretching and gain motion with active ROM exercises.

Active ROM- begin after 6 weeks

Range of motion goal after 12 weeks is slight limitation of motion.

Progress strengthening with isometric deltoid, internal rotation, external rotation, scapular stabilizers.

Begin progressive isotonic resistance at 8-10 weeks post-op

After Week 12

Progressive resisted strengthening, closed chain, plyometric.