



# ANTERIOR INSTABILITY REPAIR (LABRAL STABILIZATION) WITH / WITHOUT REMPLISSAGE Physical Therapy Protocol

Patient Name: \_\_\_\_\_ Date of Surgery: \_\_\_\_\_

**Procedure:** Right / Left Shoulder Anterior Stabilization/Bankart Repair

\*\*\*Associated osseous procedure (circled if applicable): Osseous Bankart Repair

\_\_\_\_ Evaluate and Treat – no open chain or isokinetic exercises

\_\_\_\_ Provide patient with home exercise program

Frequency: \_\_\_\_\_ x/week x \_\_\_\_\_ weeks

\_\_\_\_\_ **Phase I (0-4 weeks if typical Bankart; 0-6 weeks if osseous Bankart)\*\*\*:**

*Period of protection: In general, sling should be worn at all times during this phase (except for hygiene and PT). Motion and strengthening exercises are performed within strict motion limits.*

• **Weeks 0-1: No formal PT.**

1. Sling at all times (except for hygiene and pendulums).
2. Home exercises only (pendulums, elbow + wrist ROM, grip strengthening).

• **Weeks 1-4: (1-6 if osseous Bankart): Begin formal PT (2-3 x/week).**

1. Sling at all times (except for hygiene and PT).
2. ROM: Restrict motion to 90° FF / 20° ER at side / IR to stomach / 45° abduction.
  - Progress PROM → AAROM → AROM as tolerated within the above limits.
  - Hold cross-body adduction until 6 weeks post-op.
  - Heat before, ice after.
3. Strengthening: Cuff/periscapular/deltoid isometrics in sling only.

\*\*\*Note: if an osseous Bankart repair was performed, the above protection phase should last 6 weeks.

\_\_\_\_\_ **Phase II (4-8 weeks for typical Bankart; 6-8 weeks if osseous Bankart): Transition to active motion and protected strengthening.**

1. D/C sling if cleared by MD (will keep sling until 6 weeks if osseous Bankart repair performed).
2. ROM: Progress AROM 160° FF / 45° ER with arm at side / 160° ABD/IR behind back to waist.
3. Strengthening:
  - Progress cuff/deltoid and periscapular strengthening (isometrics/light bands) within above motion limits.
  - Modalities as per PT discretion.

\_\_\_\_\_ **Phase III (8-12 weeks): Advance ROM and more aggressive strengthening.**

1. **ROM:** Advance passive ROM to full with gentle passive stretching at end ranges. Advance to full active ROM as tolerated.
2. **Strengthening:**
  - Advance as tolerated from isometrics → bands → light weights (1-5 lbs) w/8-12 reps x 2-3 sets for cuff, deltoid, scapular stabilizers (*Only do this 3x/week to avoid cuff tendonitis*).

\_\_\_\_\_ **Phase IV (3-12 months): Progress to sport-specific/occupation-specific rehab.**

1. **ROM:** If ROM lacking, advance to full via gentle passive stretching at end ranges.
2. **Strengthening:**
  - Continue with light weights 3x/week.
  - Begin eccentrically resisted motions, plyometrics (*weighted ball toss*), proprioception (*body blade*) and closed-chain strengthening.
  - Transition to sports-specific/job-specific rehab and advanced conditioning as tolerated.
3. **Throwing:**
  - @ 4.5 months - if full-strength – can return to light tossing.
  - @ 6 months, throw from the pitcher's mound and/or return to collision sports (hockey, football, etc.).
4. **Work:**
  - Overhead work without lifting is usually possible @ 4.5-6 months.
  - Resume heavy labor once full-strength achieved (usually by 6-9 months).

By signing this referral, I certify that I have examined this patient and physical therapy is medically necessary.

This patient \_\_\_\_\_ would \_\_\_\_\_ would not benefit from social services.

Physician Name: \_\_\_\_\_ Date: \_\_\_\_\_