

Center for Athletic Medicine
Dr. Preston Wolin
Posterior Labral/Bankart Protocol
Adapted from Paul Kiritsis, MD

Phase I: Immediate post-operative phase (Restrictive motion)

- Goals: Protect the anatomic repair
Prevent the negative effects of immobilization
Promote dynamic stability
Decrease pain and inflammation

Weeks 0-2

- Sling for 4 weeks in ER
- Sleep in immobilizer for 4 weeks
- Elbow and hand ROM exercises
- Hand gripping exercises
- Passive and gentle active assistive ROM
 - Flexion to 60-90
 - Elevation to 60 in scapular plane
 - ER to 5-10
 - Avoid IR

***No active IR or adduction

- Submaximal isometrics for shoulder musculature
- Cryotherapy, modalities as indicated

Weeks 3-4

- Discontinue sling at 4 weeks
- May use immobilizer for sleep
- ROM exercises (PROM and AAROM)
 - Flexion to 90-110 in scapular plane
 - Abduction to 75-85
 - ER in scapular plane to 30
 - No IR
- No active IR, adduction, or elevation
- Continue isometrics, modalities, and cryotherapy

Weeks 5-6

- Gradually improve ROM, begin AROM in all planes at 6 weeks
 - Flexion: 140
 - ER at 45 degrees ABD: 25-30
 - IR to 20 with arm at side
- Initiate exercise tubing ER (arm at side)
- PNF manual resistance

Phase II: Intermediate phase (Moderate protection)

Goals: Gradually restore full ROM

Preserve the integrity of the surgical repair

Restore muscular strength and balance

Weeks 7-9

-Gradually progress ROM

- Full flexion
- ER at 90 abduction: 45-70
- IR at neutral to belly
- Begin IR in 30 deg abduction to 30

-Progress isotonic strengthening program

-PNF strengthening

***Protect posterior repair

Weeks 10-14

-Slightly more aggressive strengthening

-Continue all stretching exercises

***Progress ROM to functional demands

-Progress IR motion in abducted position

-May begin to increase IR at 90 degrees of abduction (12 weeks)

***Protect posterior repair

Phase III: Minimal protection phase

Goals: Establish and maintain full ROM

Improve muscular strength, power, and endurance

Gradually initiate functional activities

Criteria to enter phase III:

1. Full pain free ROM
2. Satisfactory stability
3. Strength improving
4. No pain or tenderness

Weeks 15-18

-Continue all strengthening exercises

-Progress IR as tolerated

-Continue strengthening exercises

- Fundamental throwing exercises
- PNF manual resistance
- Endurance training
- Initiate light plyometrics
- Light swimming

Weeks 18-21

- Continue all above exercises
- Initiate ITP

Phase IV: Advanced strengthening phase

Goals: Enhance strength, power, and endurance
Progress functional activities
Maintain shoulder mobility

Criteria to enter phase IV:

1. Full pain free ROM
2. Satisfactory static stability
3. Strength 75-80% of contralateral side
4. No pain or tenderness

Weeks 20-24

- Continue flexibility exercises
- Continue isotonic strengthening program
- PNF manual resistance patterns
- Ploymetric strengthening
- Progress ITP

Phase V: Return to activity phase (6-9 months after surgery)

- Gradually progress sport activities to unrestricted participation

***** If a patient is not progressing, please call the office for recommendations
