Physical Therapy Reverse Bankart Repair
Post-Operative Therapy Plan

Date of Surgery: ________________

Surgeon: ______________

Date of Injury: ________________

Additional Considerations/Precautions (tissue quality, anchor type, etc): _____________________
___________________________________________________________________________________

Sling: 6 weeks. Remove for showering/dressing and PT exercises. May begin weaning sling at home at 4 weeks, but to continue use during activity outside the house and sleeping.

Next Follow Up with MD/PA: ________________

This therapy plan provides a synopsis of guidelines for recovering from surgery with St. Luke’s Sports Medicine. It is provided as an educational resource. Individual circumstances vary and these plans cannot replace the advice of a medical professional.
Copyright St. Luke’s Health System, 2019

Last Reviewed: 6/2019; Current to: 6/2020
Reverse Bankart Repair

**Precautions:** Avoid flexion, horizontal adduction and IR (hand behind back) x 8 wks
If biceps tenodesis - Hold biceps with resistance x 8 wks

*Ideally patients should achieve the following milestones before advancing to the next stage.*

<table>
<thead>
<tr>
<th>Weeks</th>
<th>Intervention</th>
<th>Milestones</th>
</tr>
</thead>
<tbody>
<tr>
<td>7-8</td>
<td>Continue PROM, but continuing to protect flexion, IR, and horizontal adduction. Continue AAROM and gradual progression of ROM in all other planes. Initiate AROM to 90° for scaption. Continue isometrics out of sling.</td>
<td>Full shoulder PROM for abduction and ER</td>
</tr>
<tr>
<td>9-12</td>
<td>Advance AROM to include flexion, IR, and horizontal adduction. Initiate PREs within AROM limitations. Initiate light closed chain exercises with progression throughout phase. Initiate plyometric exercises.</td>
<td>AROM progressing to full - IR behind back to waist</td>
</tr>
<tr>
<td>13-16</td>
<td>Progress PREs→resistance→90/90 Continue scapular exercises. Progress closed chain exercises to full weight bearing. Begin push up progression. (DO NOT cross midline). Progress plyometric exercises →Single arm Begin PNF patterns. Begin Overhead strengthening. Initiate gym program: 3-4x/wk - Always see back of hand - Low weight/high reps to begin</td>
<td>Strength progressing without pain Maintain full ROM - Overhead within 5° of opposite side - IR within 15° of opposite side at 90/90 4/5 strength or greater</td>
</tr>
<tr>
<td>16+</td>
<td>Continue plyometric exercises. Sport specific activity - Begin return to throwing/swimming regimen per physician direction (~5 mos) Regular gym attendance (nothing behind the neck, always see back of hand)</td>
<td>5/5 strength Progress to all normal activities as tolerated Pass appropriate selected functional return to sport tests Return to sport</td>
</tr>
</tbody>
</table>

This therapy plan provides a synopsis of guidelines for recovering from surgery with St. Luke's Sports Medicine. It is provided as an educational resource. Individual circumstances vary and these plans cannot replace the advice of a medical professional.

Copyright St. Luke’s Health System, 2019

Last Reviewed: 6/2019; Current to: 6/2020
This therapy plan provides a synopsis of guidelines for recovering from surgery with St. Luke's Sports Medicine. It is provided as an educational resource. Individual circumstances vary and these plans cannot replace the advice of a medical professional.

Copyright St. Luke’s Health System, 2019

Last Reviewed: 6/2019; Current to: 6/2020