## **Bankart Lesion Repair Rehabilitation Programme**

## **Key messages**

- Restricted External Rotation for 6 weeks
- External rotation may be permanently limited at end of range, if capsular reefing also performed
- Ensure full <u>available</u> range returned
- Encourage correct quality of movement pattern
- If above 30 years of age, monitor for frozen shoulder
- Check Op note to exclude Posterior Bankart.

Time	Rehab	Goals / aims
Pre-op	Scapular stabilisation exercises Transvers abdominals/Postural advice	
Theatre	May be done with small open excision if unable to access via arthroscopy - Will not change rehab  May also add capsular reefing	
Day 1 Day Case Surgery	<ul> <li>Check specific post-op instructions:</li> <li>Sling: 4 - 6 weeks</li> <li>Active assisted Flexion, Abduction to 90° - depending on post-op instructions, and External rotation</li> <li>Instructions for sling, washing/dressing</li> <li>Elbow, wrist and hand exercises</li> <li>Advice on posture &amp; scapular control</li> <li>**External rotation to 20° -30* only** for 6 weeks</li> <li>**Avoid combined ER/Abduction</li> </ul>	Advice: - Driving – after 8 weeks if comfortable and safe& Only if patient can perform emergency manoeuvres safely - Work: Sedentary: 1-2 weeks if comfortable - Heavy: 3-4/12 – discuss with consultant - Contact sports – 6/12
OP physio 1 - 2 weeks	<ul> <li>Check ROM</li> <li>Check analgesia management &amp; wound healing</li> <li>Active assisted Flexion, Abduction up to 90° - depending on post-op instructions, and External rotation</li> <li>Scapular stabilisation exercises – movement pattern correction</li> <li>Isometric rotator cuff</li> <li>Partially loaded proprioceptive exercises: (eg. Prayer kneeling/ forearms on table)</li> <li>Oxford Score- instability</li> </ul>	
3 - 6 weeks	<ul> <li>Check movement pattern</li> <li>Start active flexion/abduction ROM</li> <li>Avoid combined ER/Abd</li> <li>Fully loaded Proprioceptive exercises: static (eg 4 point kneeling) as patient tolerates.</li> </ul>	Discard Sling (as detailed in op note)
6 weeks plus	<ul> <li>Start active ER</li> <li>Through range AROM exercises</li> <li>Rotator cuff strengthening through range</li> <li>Progress scapular control if required</li> <li>Start gym rehab - if appropriate</li> </ul>	Good scapulo-humeral rhythm Full functional ROM
12 weeks  Consultant OP appointment	<ul> <li>Resistance work/ Open chain rehab: strengthening exercises through range - free weights, theraband (amend depending on pain levels)</li> <li>Sports specific rehab (if indicated)</li> <li>Plyometric exercises( eg. bounce ball against wall)</li> </ul>	
Complications	Failure – recurrent detachment	
Final goals	Return to work/sports training Good functional ROM	Outcome measure Oxford Score- instability