

**GARRETT COUNTY ORTHOPAEDICS**

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**Arthroscopic Anterior Labral (Bankart) Repair  
and/or Anterior Capsular Plication  
Plus Type II SLAP Repair or Biceps Tenodesis**

**PHASE I: Weeks 1 through Week 4 – PROTECTION PHASE**

**PT Sessions:** Home program after initial visit with physical therapist

**Sling:** Shoulder immobilizer / abduction sling

1. Wear when walking and sleeping for 1<sup>st</sup> 4 weeks after surgery
2. Remove multiple times per day at least for home PT exercises, and for personal hygiene

**Exercises:**

1. Grip Strength w/ foam ball, towel, putty to squeeze repetitively
2. Hand, wrist, elbow full AROM w/ light weights (1-3 lbs.; increase as tolerated)
3. Shoulder passive pendulum exercises in sling or forearm supported
4. Assisted PROM shoulder to maximum of 45° flexion, 10° external rotation, 30° abduction; NO extension
5. Scapular retraction; gently pinch shoulder blades together for 5 sec
6. NO stress on biceps, NO Active biceps exercises or lifting

**Aerobic Conditioning:** may ride stationary bike while wearing immobilizer

**PHASE II: Week 4 - 8 – EARLY STRENGTHENING & ENDURANCE**

**PT Sessions:** Directed by physical therapist

**Sling:** D/C shoulder immobilizer/sling at 4 weeks

**Exercises:**

1. Continue grip strength exercises
2. Continue hand, wrist, elbow full AROM w/ weights
3. Passive pendulums w/ elbow extended and forearm unsupported
4. Gentle Assisted PROM shoulder to full as tolerated
5. Scapular retraction; gently pinch shoulder blades together for 5 sec
6. Cross chest (posterior capsule) stretch
7. Mild ADL's at or below waist level
8. NO stress on biceps, NO Active biceps exercises or lifting

**Aerobic Conditioning:** Stationary bike or treadmill

**PHASE III: Week 8 - 12 – ADVANCED STRENGTHENING & ENDURANCE**

**PT Sessions:** Directed by physical therapist

**Sling:** none

**Exercises:**

1. Continue previous grip and hand/wrist/elbow AROM exercises
2. Shoulder full PROM exercises w/o limitations; include wand/stick, pulley, towel stretch, wall climbs, assistance from opposite UE, etc...  
**DO NOT PUSH THROUGH ANY SHARP OR STABBING PAIN**
3. Gentle shoulder active assisted range-of-motion (AAROM) exercises in all planes
4. Scapular retraction, shoulder shrugs, and postural correction
5. 5-way isometric strengthening exercise
6. Moderate ADL's from waist to shoulder; overhead activity for reaching only – no overhead strengthening

**Aerobic Conditioning:**

1. Stationary bike, elliptical trainer, stairmaster
2. May walk on treadmill; NO running
3. Upper body cycle up to 5 min forward and 5 min backward

**Criteria for Progression to PHASE IV:**

1. 90% shoulder FAROM
2. Pain-free ADL's up to shoulder height
3. Able to perform 5 min of upper body cycle w/o pain

**PHASE IV: Week 12 - 16 – BASIC FUNCTIONAL PHASE**

**PT Sessions:** Directed by physical therapist

**Exercises:**

1. Continue previous exercises with emphasis on full AAROM
2. Shoulder AROM exercises and ADL's in all planes to fatigue
3. Resistance theraband exercises
4. 6-way isometric strengthening
5. May use 5-10 lbs. Free weights with AROM exercises
6. Start with wall push-ups; progress to push-ups on table, then to knees
7. Basic aquatic (pool) therapy if available
8. Full ADL's; lifting – progress at tolerated

**Aerobic Conditioning:**

1. May begin jogging self-paced in addition to bike, elliptical trainer, and stairmaster
2. Upper body cycle up to 10-15 min forward and 10-15 min backward

**Criteria for Progression to PHASE V:**

1. Full or nearly full shoulder AROM
2. Near full strength per manual muscle testing
3. Pain-free basic functional training exercises

**PHASE V: Week 16 - 24 (6 mo) – ADVANCED FUNCTIONAL PHASE**

**PT Sessions:** Directed by physical therapist

**Exercises:**

1. FAROM exercises to fatigue; emphasize active and passive ER
2. Gradually increase weight training to maximum; must be pain free
3. Progress from knee to military push-ups; AVOID anterior capsule stretching by not dropping below the scapular plane during each rep
4. Advanced pool therapy if available

**Aerobic Conditioning:**

1. Progress running prn; should be pain-free
  2. Sport-specific drills prn; i.e. throwing, dribbling, catching
- \*\*\*\* **Throwers:**
- 6 months → may begin light throwing
  - 7 months → may throw from mound, limit velocity
  - 8 months → may do full velocity pitching

**Criteria for progression to PHASE VI:**

1. Full AROM equal to opposite UE (accept 5-10° loss of ER)
2. Full shoulder strength per manual testing

**PHASE VI: 6 Months + – RETURN TO FULL DUTY PHASE**

**When rehabilitation goals are met:**

1. Full shoulder AROM (accept 5-10° loss of ER)
  2. Full strength per manual and isokinetic testing
- \*\*\*\* **Throwers:**
- 6 months → may begin light throwing
  - 7 months → may throw from mound, limit velocity
  - 8 months → may do full velocity pitching

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