

(PROTOCOL #9) POST-OPERATIVE INSTABILITY/BANKHART/LABRUM REPAIR/SLAP REPAIR PROTOCOL

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The following is a set of general guidelines. It is important to remember that each patient is different. The progression of the patient depends on many factors including age and medical health of the patient and physician preferences. Any Bracing is discontinued **ONLY UPON DIRECTION OF PHYSICIAN.**

PHASE	FUNCTIONAL PROGRESSION/ACTIVITIES	GOALS/RESTRICTIONS
Post-op to 2 weeks	OT: elbow/hand ROM putty and ADL modifications Isometrics: deltoid (anterior, middle, posterior); Biceps/triceps, internal/external rotation Modalities as needed	DASH questionnaire at time of evaluation and every 4 weeks Decrease pain Increase ROM to WFL Follow specific limits as ordered by physician for ROM, i.e. external rotation
2-4 weeks	All of above including: Supine stick external rotation, pendulum, pulley flexion and abduction, PROM gentle stretching Scapular retraction, protraction, shrugs, Pendulum	Decrease pain Strengthen shoulder and scapular muscles Movement reeducation for Scapulohumeral and Glenohumeral rhythm
6 weeks	All of above including: AROM, UBE, internal rotation up back	Advance limits on ROM
10-12 weeks	All of above including: Start theraband strengthening 1-2 week period to progress, every other day Start external/internal rotation then add Flexion/extension and then abduction Periscapular strengthening started shortly thereafter. Rowing exercises, shrugs, retraction/protraction	Return to Functional limits Progress to all 5 planes 45° arc after 2 weeks can do daily then progress to full arc
14 weeks	All of the above: including More strengthening: light dumbbell, biceps/triceps, Advance therabands At 14 weeks can start full arc band, i.e. 90°	Activities: Gradually increase activity Golf: pitching wedge to start in approx 6 months Bowling: use weighted ball at approx 6 months Tennis: same start slow gradually increase activity Driving: able to drive, monitor meds Shower: usually after first dressing with watertight dressing Throwing: 6 months

Refer to enclosed table for suggested exercises which optimize muscle function based on EMG activity.

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Approved By:

Physician reserves the right to adjust these protocols for each Patient.

Signature: _____ Date _____
Robert M. Doane, M.D., P.C.

Signature: _____ Date _____
Balu Pisupati, PT

