

Alta View Sports Medicine



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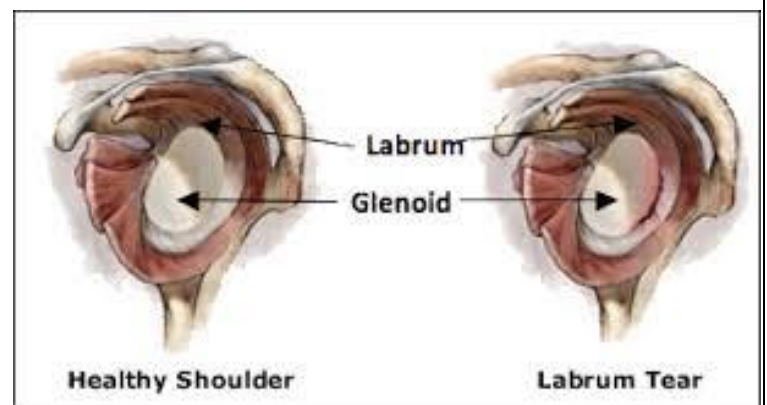
Shoulder Anterior Labral Repair (Bankart Procedure)

What to Expect

The labrum is a fibrocartilaginous rim of tissue that provides support to the shoulder joint. It attaches to the glenoid (the socket) and acts to keep the humeral head centrally located within the socket. The labrum can be damaged following trauma such as a fall onto an outstretched arm or following a shoulder dislocation. The initial treatment is conservative, but an individual who has had persistent sensations of the shoulder “coming out of joint” or multiple dislocations may need surgery to repair the labrum and tighten the shoulder capsule.

The surgery can be performed arthroscopically through a few small incisions and is done as an outpatient (you go home the same day). A full evaluation of the entire shoulder is performed. A combination of anchors with strong sutures are used to repair the torn labrum back to its native insertion on the glenoid and to tighten the shoulder capsule. The goal is to allow the labrum to heal back to the bone over time. Appropriate rehabilitation is critical to the success of the procedure.

Return to full activity and sports is delayed to allow time for the underlying tendon to heal.



Phase 1 (0 – 2 weeks postop)

Goals: Control pain, Diminish swelling, Protect the rotator cuff repair

- Pain: You will be prescribed pain medication to use after surgery. Use as directed and wean use to as needed. You may begin taking an anti-inflammatory medication (i.e. ibuprofen, naproxen) unless medically contraindicated. Do not drive or use alcohol while taking narcotic pain medication.
- Sling: A sling with an abduction pillow will be placed before you wake up from surgery. Keep the sling on at all times when up and about and when sleeping. You may remove your arm gently from the sling to move your elbow, wrist, and fingers when sitting in a controlled environment at home a few times a day. Avoid any shoulder motion. To protect the tendon repair and for your comfort, the sling is used for 6 weeks.
 - Have someone help you remove and replace the sling. It is easier to wear button down shirts instead of pullover shirts. With the sling removed, hold your shoulder steady as if the sling were still on, slip your shirt over your arm and shoulder, and then have someone assist in replacing the sling and pillow.
- Ice: Place a bag of ice or cryocuff on the shoulder for 30 minutes a few times each day and after therapy or home exercises.
- Dressing: Remove the shoulder dressing/tape about your shoulder on the 3rd day after surgery
 - You may shower after the 3rd day, but stand keeping the shoulder away from the direct shower spray. To wash under your arm bend forward allowing the hanging arm to drift away from your body. Do not lift your arm or try to move the shoulder using its muscles. Pat the shoulder dry and cover incisions with band-aids.
 - Keep incisions covered with band-aids to protect incision during the day
- Driving: make arrangements as you should not drive while wearing a sling— usually about 4-6 weeks after your surgery.
- Schedule your postoperative visit for 10-14 days after surgery. At this visit:
 - Suture removal
 - Review of your surgery (bring your surgical photos) and rehab plan

Phase 2 (2 - 4 weeks postop)

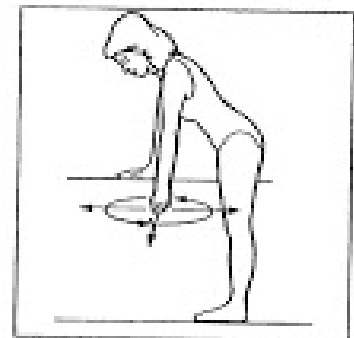
Goals: Control pain, Gentle passive shoulder motion, Protect the labral repair

- Sling: Use the sling at all times when up and about and when sleeping. Use caution when showering as outlined in Phase 1.
- Schedule a clinic visit about 6 weeks from your surgery date

Exercises

- Precautions:
 - DO NOT raise your arm or elbow away from your body using its muscles
 - NO lifting objects
 - NO sudden arm movements
 - DO NOT reach behind your body in motions such as to tuck in your shirt or reach for your wallet
- Arm, wrist, finger motion
 - Remove arm from sling to bend your elbow, wrist, and fingers for 5 min 5x/day
- Pendulum exercises
 - Gently remove sling, bend forward to allow your hanging arm to fall away from your body.
 - Use your unaffected arm to rotate your operative arm in a circular motion and side to side. Your operative shoulder and arm should remain completely relaxed
 - 3 min 3x/day
- Shoulder shrug

Pendulum Exercise



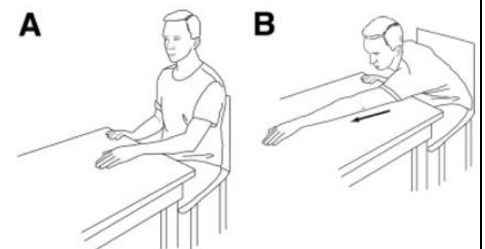
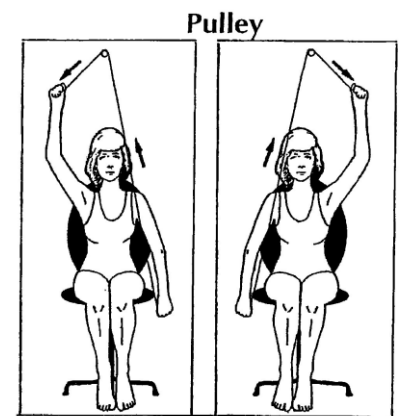
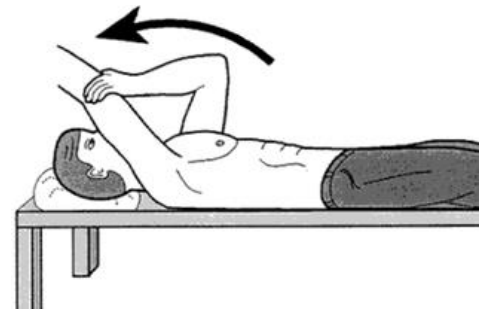
Phase 3 (4-6 weeks postop)

Goals: Begin gentle shoulder stretching, improve passive range of motion, protect the labral repair

- Sling: you may remove your sling during stretching and motion activities and begin to wean out of it during the day. If you experience any increase in shoulder pain or feeling of fatigue, replace the sling to allow the shoulder to rest. You may remove the sling to sleep.
- No lifting or carrying objects. Begin stretching your arm using the assistance of your unaffected arm and performing exercises as instructed below. Do not reach back behind your body with your arm.

Exercises

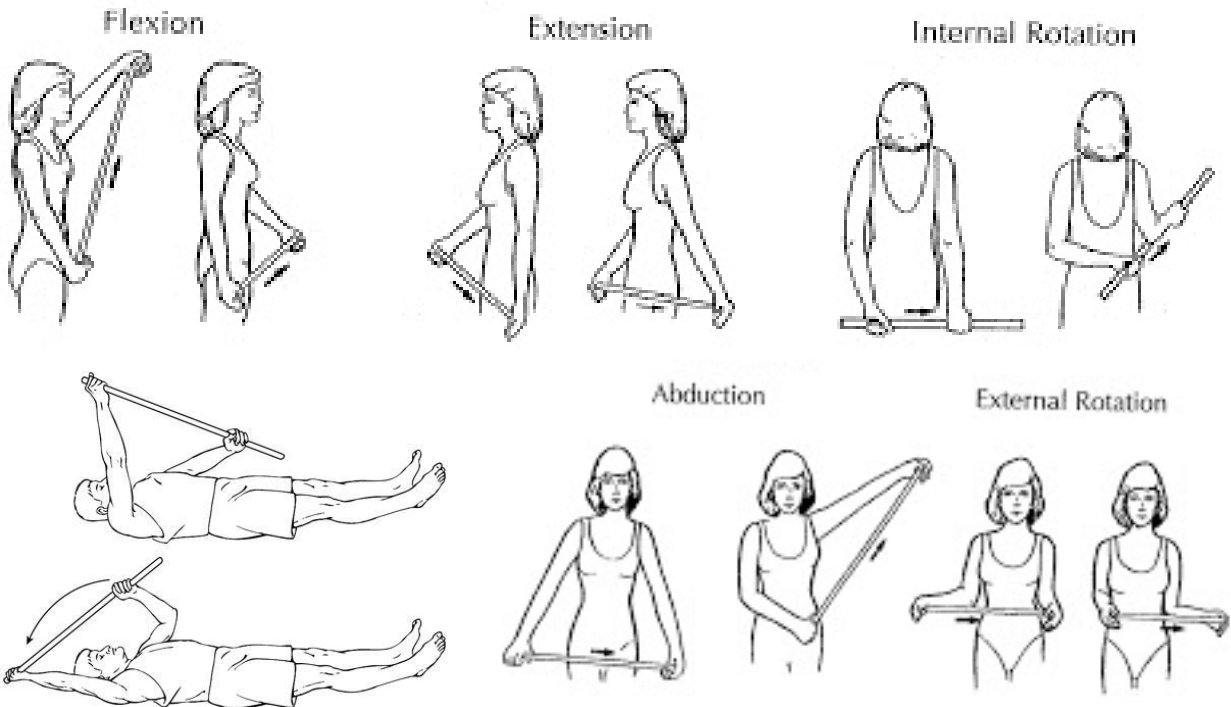
- Continue all exercises from Phase 1
- Passive Range of Motion—perform stretching exercises for at least 5 min 5x/day
 - Supine forward flexion
 - Lying on your back, raise your surgical arm by the wrist/elbow using your unaffected arm
 - Pulley exercises
 - Keep surgical arm relaxed while raising and lowering it through the pulley with unaffected arm
 - Table Slides
 - Place surgical arm on a magazine or other flat sliding object on a table, stabilize at wrist with unaffected hand to begin sliding motion. Hold for 10 sec. Retract by reclining body and using unaffected hand. Avoid lifting surgical arm off table.



Phase 3 Exercises continued

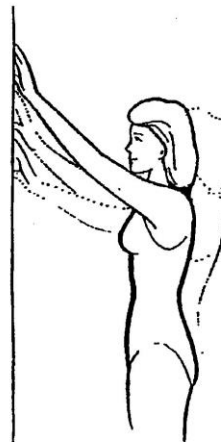
○ Stick Exercises

- Use unaffected arm to gently push surgical arm in abduction, external rotation, forward flexion, extension, and internal rotation as shown below. Hold each stretch for 10 sec. Keep surgical shoulder relaxed throughout the motions.
- Goal by 12 weeks: full motion in each plane as your unaffected shoulder



○ Walk the Wall

- Gently walk up and back down a wall keeping your surgical shoulder relaxed. Hold for 10 sec and lean into the wall at the point where you feel the stretching sensation/mild pain.



Phase 4 (6-12 weeks postop)

Goals: Maintain full passive range of motion, Begin active range of motion, protect the labral repair

- You may begin to use your operated shoulder/arm for normal daily activities such as dressing, bathing, self-care. Avoid any forceful pushing or pulling motions. No lifting objects greater than 5 lb at this point. Any undue tension may disrupt the repair as the labrum is still in the healing phase.
- You may begin perform all previous stretching exercises using your surgical shoulder on its own. Additional stretches shown below.
- You may progress to Phase 5 strengthening once you have achieved full, pain-free motion of your surgical shoulder.
- Schedule a clinic visit about 3 months out from your surgery date

Exercises

- Continue stretching exercises from Phases 2 & 3

- Posterior stretch

- Door Hang

- Gently bend your knees while maintaining grip on the top of door or shower stall to stretch the shoulder. Hold for 10 sec

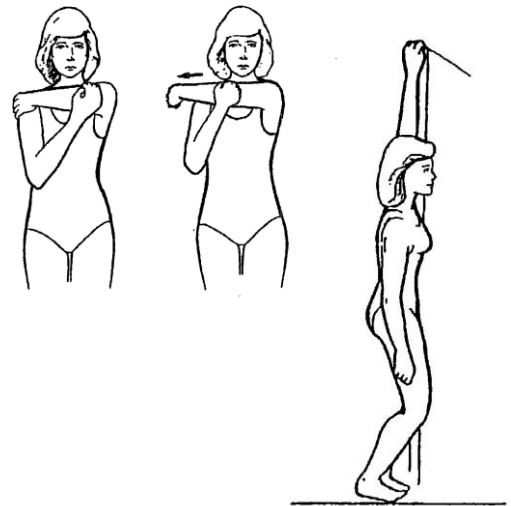
- Active Range of Motion

- Begin rotating your shoulder on its own to achieve full motion.

- Sidelying external rotation/internal rotation

- Prone Rowing

- Prone Horizontal
Abduction/Extension/Flexion



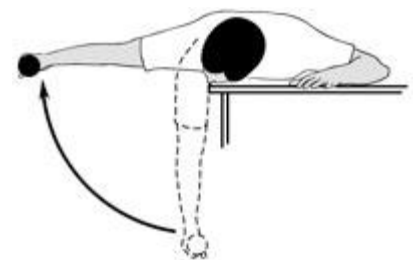
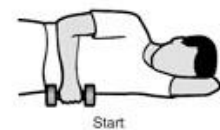
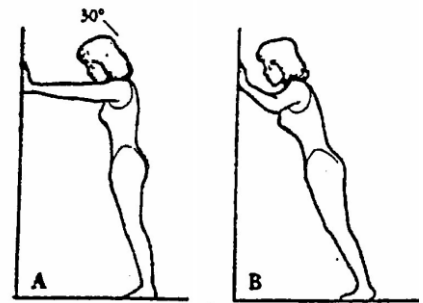
Phase 5 (~ 3-6 months postop)

Goals: Maintain full active range of motion, Begin rotator cuff and peri-scapular muscle strengthening, Improve ability to perform functional daily activities

- Strengthening the rotator cuff muscles is important to the health of the tendons and it will take time to rebuild their strength. Use high repetition with low-weight exercises. Your therapist will be an invaluable resource and will instruct you on appropriate strengthening regimen as well.
- Precautions: Use caution with lifting objects away from your body or overhead. Avoid excessive repetitive use of the shoulder. Stop activity/exercises and rest if you begin to experience an increase in pain.
- Schedule a clinic visit for about 6 months from your surgery date.

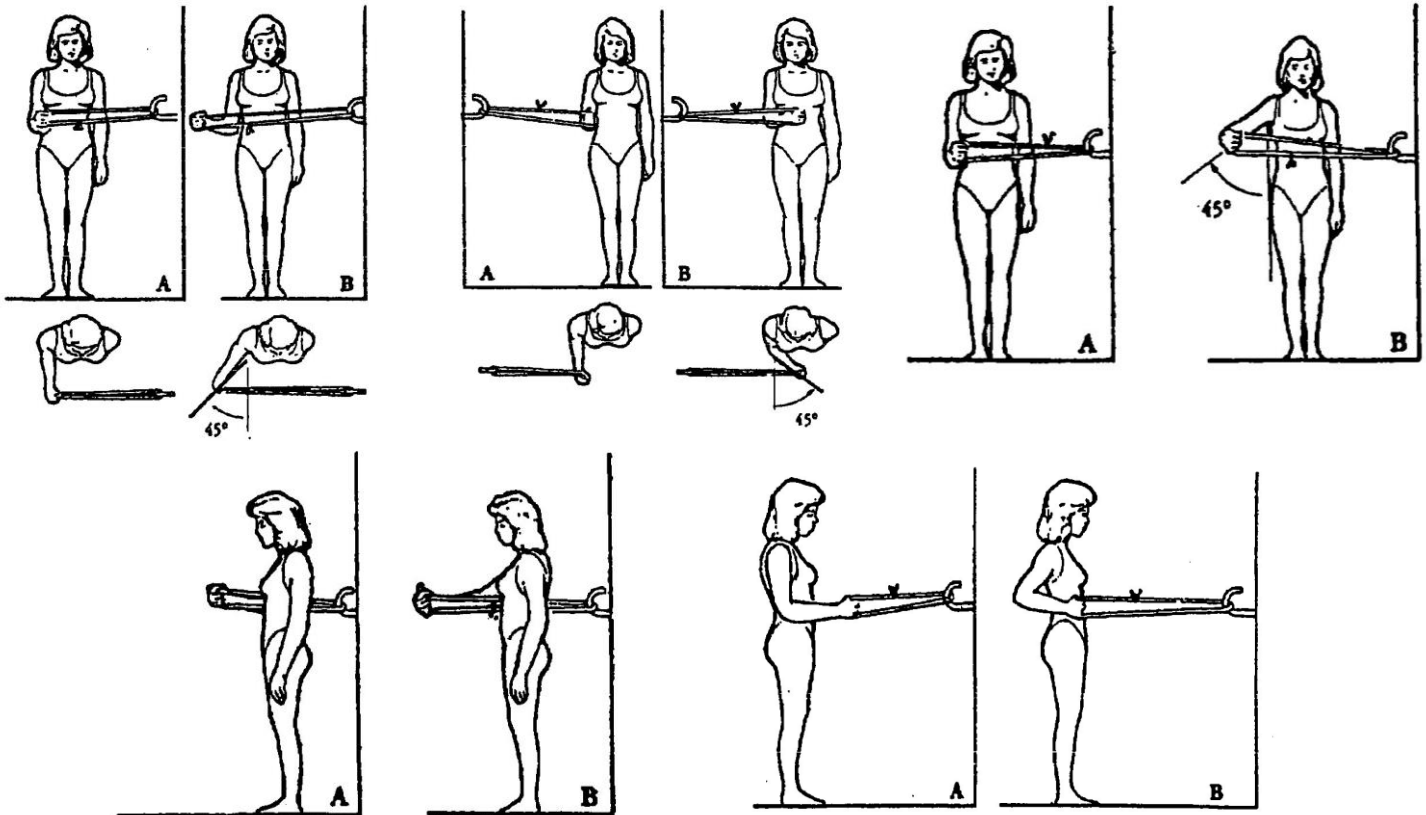
Exercises

- Continue stretching exercises from Phases 2, 3 & 4
- Begin strengthening exercises with 1 lb weight, then progress up to 5 lb as tolerated.
- Exercise for ~ 5 min 5x/day
- Wall Push-Ups
- Sidelying external/internal rotation
 - Lie on non-operative side, keep elbow bent at 90°. Lift hand off your abdomen and raise to the ceiling keeping elbow at your side.
- Prone Horizontal Abduction
 - Keep the elbow straight, raise arm slowly to eye level straight out to your side.
- Prone Horizontal Abduction/External Rotation
 - Keep the elbow straight, raise arm slowly to eye level straight out to your side with your thumb pointing up toward the ceiling



Phase 5 Exercises continued

- Scapular Protraction/Retraction
 - Keep elbow straight and without moving your shoulder, squeeze your shoulder blade (scapula) toward your opposite scapula.
- Biceps Curls (high-rep/low-weight)
- Triceps Curls or Prone Rowing
- Theraband Exercises
 - Begin with Yellow theraband, progress weekly as long as each previous band is easy to use.
 - Other exercises can be introduced by your therapist



Phase 6 (6+ months postop)

Goals: Maintain full active range of motion, Continued rotator cuff and periscapular muscle strengthening, Return to full activity and sport

- Return to full activity including lifting without restriction, weight training, throwing, and sports activity requires that you have pain-free full active range of motion and rotator cuff strength near that of your unaffected shoulder. This will be discussed in a clinic visit prior to your full release. Again, return to full activity is variable depending on the type of tear, your motion, pain, and expectations.
- Precautions: General rotator cuff health involves continual stretching and strengthening to your shoulder and avoiding activities that increase strain on your shoulder such as heavy lifting, pushing/pulling overhead or away from your body, and repetitive shoulder motion.

Exercises

- Continue theraband and Phase 5 strengthening exercises
 - 3x weekly for 30 min.
- Plyometric shoulder exercises
- Overhead athletes (baseball, softball, tennis, etc):
 - Gradual, progressive throwing program
- Sports participation
 - Gradually return to sports. Allow for 1-2 days of rest after any increase in shoulder pain.