Open Anterior Stabilization (with or without Bankart):
The intent of this protocol is to provide the clinician with a guideline of the post-operative rehabilitation course of a patient that has undergone an open anterior stabilization. It is no means intended to be a substitute for one’s clinical decision making regarding the progression of a patient’s post-operative course based on their physical exam/findings, individual progress, and/or the presence of post-operative complications. If a clinician requires assistance in the progression of a post-operative patient they should consult with the referring Surgeon.

(These time frames are just examples and can be adjusted based on the given procedure:)

Progression to the next phase based on Clinical Criteria and/or Time Frames as Appropriate.

Phase I – Immediate Post Surgical Phase/PROM (Day 1-21):
Goals:
- Passive Range of Motion (PROM) per orders
- Diminish pain and inflammation
- Do not overstress healing tissue
Precautions:
- Remain in sling, only removing for showering or physical therapy
- No lifting of objects with operative shoulder
- Keep incisions clean and dry

Day 1-14:
- Sling when not doing physical therapy
- PROM
  - Flexion to 90 degrees
  - Internal rotation to posterior belt line
  - External rotation to 0 degrees
- PROM/Active Range of Motion (AROM) elbow and wrist
- Ball squeeze
- Sleep with sling supporting operative shoulder
- Shower with arm held at your side
- Cryotherapy for pain and inflammation
- Patient education: posture, joint protection, positioning, hygiene, etc.
Day 15-21:
- Same as Day 1-14 with the exception of advanced PROM parameters
- PROM
  - Full flexion
  - Full internal rotation
  - External rotation to 30 degrees

Phase II – Intermediate Phase/AROM (Week 4 and 5):
Goals:
- Continue to increase external rotation PROM to 45 degrees
- Full AROM to PROM parameters

Precautions:
- Wean from Sling
- Can begin gentle external rotation stretching in the 90/90 position
- No lifting with affected arm

Week 4 and 5
- AROM, full flexion and internal rotation and external rotation to 45 degrees
  - Progress to full AROM in the against gravity position
- Begin incorporating more aggressive posterior capsular stretching
  - Cross arm stretch
  - Side lying internal rotation stretch
  - Posterior/inferior gleno-humeral joint mobilization
- Begin gentle rhythmic stabilization techniques for rotator cuff musculature strength
- Continue cryotherapy as necessary

Phase III - Strengthening Phase (Week 6 – Week 10)
Goals:
- Continue to increase external rotation PROM to full gradually
- Maintain full non-painful AROM
- Improve muscular strength, stability and endurance
- Gradual return to full functional activities

Precautions:
- Be sure not to stress the anterior capsule with aggressive overhead strengthening
- Avoid contact sports/activities

Week 6-8
- Continue stretching and PROM as needed/indicated
- Continue rhythmic stabilization exercises
- Initiate strengthening program (elastic resistance)
  - ER/IR with elbow at the side of the body

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- Forward punch
- Seated row
- Shoulder shrug
- Seated row
- Bicep curls
- Lat pulls
- Tricep extensions
- Push-up plus

**Week 8-10**
- Continue stretching and PROM as needed/indicated
- Continue all exercises listed above
- Begin gentle strengthening overhead, avoiding excessive anterior capsule stress
  - ER/IR in the 90/90 position
  - D1/D2 flexion and extension diagonals

**Phase IV – Return to activity phase (Week 10 - Week 20)**

Goals:
- Gradual return to strenuous work activities
- Gradual return to recreational activities
- Gradual return to sports activities

Precautions:
- With weight lifting, avoid wide grip bench press, and no military press or lat pulls behind the head. Be sure to “always see your elbows”
- Do not begin throwing, or overhead athletic moves until 4 months post-op

**Week 10-16**
- Continue stretching and strengthening
- Can begin golf, tennis (no serves until 4 mo.), etc.
- Can begin weight lifting with low weight, and high repetitions, being sure to follow weight lifting precautions.

**Week 16-20**
- May initiate interval sports program if appropriate

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