



Michael G. McNamara, MD  
 Kevin C. Paisley, DO  
 Jason R. Gray, MD

Robert R. Thomas, PA-C  
 Jennifer A. Fayette, PA-C  
 David P. Wonchala, PA-C

4015 Lake Otis Parkway, Suite 201 Anchorage, AK 99508 • Phone 907-771-3500 • Fax 907-771-3550 • [www.akhanddoc.com](http://www.akhanddoc.com)

**\*Anterior Shoulder Instability  
S/P Capsular Shift/Bankart Repair  
Post Operative Rehabilitation Protocol  
(Page 1/2)**

**Prior to Surgery:**

- Expect a call from your physical therapy facility to schedule a “Prehab” appointment for you. This appointment will encompass exercises that you may start after surgery, how to perform your activities of daily living, how to best remove and apply your sling, etc.
- Unless otherwise decided, expect a call from Rapid Recovery to fit you for your post-operative sling and to demonstrate and instruct you on how to use the cryocuff (ice machine).
- At the surgical center, the anesthesiologist will discuss the option of a nerve block to numb your shoulder and arm for your surgery, often using an indwelling nerve block or pain ball.

**Following Surgery:**

- Expect surgical bulky dressing for 3-5 days and arm immobilization sling to be worn at all times (except during exercises) for:
  - 6 weeks for patients < 20 years old
  - 6-8 weeks for patients 20-40 years old
  - 2-4 weeks for patients > 50 years old
- Use cryocuff or ice shoulder 3-5 times per day for 30 minute intervals until your next clinic visit.
- Maintaining upright shoulder positioning may be more comfortable. (You may sleep in a recliner chair at night if it is more comfortable, but this is not required or use pillows behind you to prop yourself up.)
- Take your pain medicine as needed and as prescribed. Call if any problems or questions arise.

**3 Days Post Op:**

- After the pain ball is removed after 3 days, may remove the dressing and the yellow gauze, allowing the water to flow over the incision, no scrubbing or soap.
- After your shower, gently pat the incisions dry and apply band-aids or a clean dry dressing. No ointments or oils on the incisions until after the sutures are removed.
- Take your pain medicine as needed and as prescribed. Call if any problems or questions arise.

**10-14 Days Post Op:**

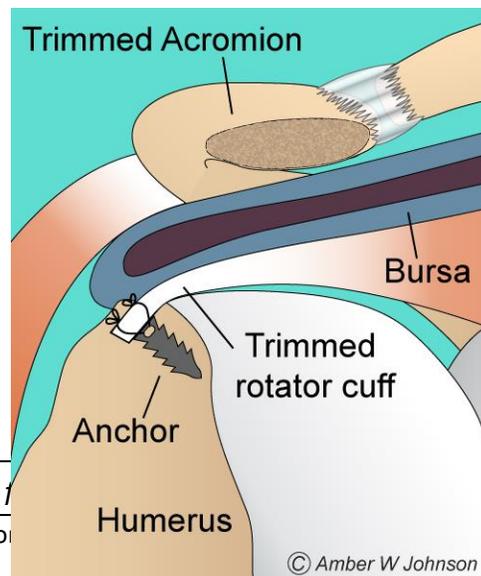
- Sutures will be removed in the office.
- Remove immobilizer for elbow flexion and extension exercises 3-4 times/day.

**8 Weeks Post Op:**

- Follow up appointment in clinic with P.A. or Surgeon.
- Return to activities of daily living.

*\*Please visit our website at [www.akhanddoc.com](http://www.akhanddoc.com)*

Note: These instructions are to serve as guidelines and are subject to Physician discretion depending on the individual.



© Amber W Johnson



Michael G. McNamara, MD  
 Kevin C. Paisley, DO  
 Jason R. Gray, MD

Robert R. Thomas, PA-C  
 Jennifer A. Fayette, PA-C  
 David P. Wonchala, PA-C

4015 Lake Otis Parkway, Suite 201 Anchorage, AK 99508 • Phone 907-771-3500 • Fax 907-771-3550 • [www.akhanddoc.com](http://www.akhanddoc.com)

- Begin Active/Passive Range of Motion (A/PROM) of the shoulder by using pulleys and dowel rod to improve forward flexion.
- Begin very gentle external rotation. Don't ever force motion. PROGRESSIVE STRETCH.
- Sling may be discontinued between 6-8 weeks depending on patient's progress. If motion is easily achieved, may expect immobilization for 8 or more weeks. If shoulder ROM is lacking, sling may be removed at 6 weeks. (This will be determined by your age and progress. Ask MD or therapist.)

### **12 Weeks Post Op:**

- Follow up appointment in clinic with P.A. or Surgeon.
- Begin resisted strengthening of the deltoids, scapular stabilizers, external and internal rotators using bands.
- Gently increase external rotation.

### **Considerations:**

- Expect 4-6 months before released to competitive sports and full-unrestricted use in heavy job requirements.
- Continued improvement can occur for 1- 1 ½ years!!
- Remember, the initial goal is to allow the front of the shoulder to tighten up with scar preventing instability. The long-term functional goal involves **slow progressive motion and stretch during healing** to prevent the shoulder from becoming too stiff, while at the same time not stretching the capsule out too much during the 8-week healing period.
- Expect some loss of external rotation.

### **Precautions:**

- Watch for signs of infection and call immediately if these signs develop:
  - Fever higher than 102°F, shortness of breath, or have nausea and vomiting that do not improve with anti-nausea meds.
  - Warmth, redness, and/or increased drainage coming from your incision site.
- Watch for signs of blood clots and go to the ER immediately if these signs develop:
  - Excessive increase in swelling, hardness, pain, or redness in forearm or calf.
- Do not elevate surgical arm above 90° (shoulder level) for the first 6 weeks.
- No external rotation past neutral for 6-8 weeks.

*\*Please visit our website at [www.akhanddoc.com](http://www.akhanddoc.com) for illustrations.*

Note: These instructions are to serve as guidelines and are subject to Physician discretion. Actual progress may be faster or slower depending on the individual.