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***Anterior Shoulder Instability
S/P Capsular Shift/Bankart Repair
Post Operative Rehabilitation Protocol
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Following Surgery:

- Expect 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 15 minute intervals until your next clinic visit.
- Maintain upright shoulder positioning at all times.
- May begin showering as long as the tegederm is intact.
- Take your pain medicine as needed and as prescribed. Call if any problems or questions arise.

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.

10-14 Days Post Op:

- Follow up appointment in clinic with MD/PA
- Tegederm will be removed.
- Gentle pendulum exercises initiated for middle-aged patients or athletes.
- Remove immobilizer for elbow flexion and extension exercises 3-4 times/day.

8 Weeks Post Op:

- Follow up appointment in clinic with MD/PA
- Return to activities of daily living.
- Begin Active/Passive Range of Motion (A/PROM) of the shoulder by using pulleys and dowel rod to improve forward flexion.

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**Please visit our website at 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.



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8 Weeks Post Op (contd.):

- 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 MD/PA.
- 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.

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