

Rehabilitation Guidelines | Arthroscopic Anterior Shoulder Stabilisation (Bankart Repair)

The recovery process

Rehabilitation after shoulder stabilisation surgery is a structured and progressive process designed to restore shoulder stability, movement, and strength while protecting the repaired tissues. Recovery requires a careful and staged progression to allow the repaired structures to heal securely before moving to subsequent stages and ultimately returning to higher-level activity.

Guidelines are provided here, however adjustments may be made by your physiotherapist during recovery tailored to your individual progress.

General guidelines

- A sling is worn for **6 weeks**, with removal at home as advised
- Early rehabilitation focuses on **protecting the repair and controlled movement**
- Exercises are typically performed **3 x / day** in the early stages

Weeks 0-6: Pain control and early mobility

During the first phase, the focus is on protecting the repair while beginning gentle movement.

In this stage:

- Sling use when out of the home or in public, with removal for simple tasks at home
- No sling required while sleeping
- Normal movement of the elbow, wrist, and hand
- Regular ice application and prescribed medication for pain management in the first week.

Exercises:

- Gentle pendulum exercises
- Controlled shoulder movement within safe limits:
 - Flexion up to 90 degrees
 - Abduction up to 45 degrees
 - External rotation to 20 degrees
 - Internal rotation to the side of the body only
- Scapular stabilisation exercises

Important:

- Avoid movement beyond prescribed limits
- Avoid sudden or forceful shoulder movements
- Avoid lifting or supporting body weight through the arm
- You may drive from around 3 to 4 weeks from surgery, removing the sling to do so

Rehabilitation Guidelines | Arthroscopic Anterior Shoulder Stabilisation (Bankart Repair)

Weeks 6-12: Restoring movement and early strengthening

Physiotherapist directed program

The sling is discontinued

Movement progresses toward full range as tolerated

Rehabilitation focuses on:

- Transitioning from assisted to active movement
- Gradually restoring full range of motion
- Improving shoulder control and coordination

Exercises:

- Isometric strengthening from around **8 weeks**
- Resistance band exercises from around **10 weeks**
- Continued scapular stabilisation exercises
- Continue range of motion work in all directions, including hand-behind-back

Important:

- Avoid heavy lifting
- Avoid sudden or high-load movements

3-6 months: Advanced strengthening and return to activity

Rehabilitation progresses to include:

- Progressive strengthening using gym or physio-guided home-based weights programs
- Functional exercises tailored to your activity or sport
- Proprioception and control (closed-chain exercises; ball on wall)

Guidance for return to activity:

- Return to manual work: approximately **4-6 months**, depending on demands
- Overhead strengthening (e.g. free weights) is delayed until later stages of recovery - **5 to 6 months**
- Return to collision, throwing or racquet sport: typically around **6 months** +

Your rehabilitation journey

Recovery after stabilisation surgery requires patience. Protecting the repair early and progressing gradually is important to achieve the best outcome, particularly early on.

Better healing of the labrum and ligaments requires protection and time, not accelerated exercises or pushing boundaries within the first 3 months.

Pain, swelling, or sharp discomfort are signs to reduce intensity.

Consistency with the program is important.

Important note

These guidelines provide a general framework for recovery. Any specific instructions provided by Dr Richard Dallalana, whether written or verbal, should be followed in preference to these guidelines.