

## Labrum Repair/Bankart/Capsulorrhaphy/Plication/SLAP/Biceps Tenodesis Protocol

Following one or more of these procedures, when a repair is present and protective positioning and immobilization is advantageous, the PMI 20-90 shoulder therapy system effectively positions the shoulder in the scapular plane and a small degree of shoulder abduction, depending on surgeon preference.

At discharge, the patient and the patient's family are given post-operative instructions on utilizing the PMI 20-90. For patients with significant instability patterns, we recommend a 4-7 day period of protection and then to begin using the gentle, controlled continuous passive motion (CPM) function of the PMI 20-90 according to their physician's recommendations. This motion may begin from 20 to 45 degrees of abduction and then slowly increased per surgeon preference and patient's comfort. Patients are encouraged to use the PMI 20-90 as much as possible while at home or according to their physician's instructions. Formalized physical therapy may or may not be incorporated with use of the PMI 20-90 during this period. This is especially important as the number of post-operative physical therapy visits is often limited. The versatility of the PMI 20-90 leads to more patient usage and satisfaction and improved surgical outcomes. Patients with isolated instability pathology may begin using the CPM function once the anesthetic block has resolved.

Another therapeutic use of the PMI 20-90 is for pain management. Position of comfort is often difficult to achieve during the recovery process. We have found that varying degrees of abduction are desired and preferred by the patient when resting or sleeping. The PMI 20-90 gives you this versatility while protecting the repair. The CPM feature of the PMI 20-90 has also shown to assist in post-operative pain management by restoring motion in a controlled situation.