

SLAP Repair Protocol

Name _____ Date _____

Procedure _____

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Frequency 1 2 3 4 5 times/week Duration 1 2 3 4 5 6 weeks

Weeks 0-1:

- Patient to do home exercises given to the post-op (posturing, pendulums, grip strengthening)
- Sling x 4 weeks

Weeks 1-4:

- No IR up the back; No ER behind the head
- ROM goals: 90° FF/20° ER at side
- No resisted FF or biceps until 6 weeks post-op as to not stress the biceps root
- At 2 weeks begin gentle passive flex/ext of elbow (Patient must use contralateral hand to move elbow passively)
- Sling for 4 weeks
- Heat before/ice after PT sessions

Weeks 4-8:

- DC sling
- Increase AAROM → AROM 140° FF/ 40° ER at side/ 60° ABD/ IR behind back to waist
- Gradually increase ER to full with arm next to body
- Strengthening (isometrics/light bands) within AROM limitations
- Also start strengthening scapular stabilizers (traps/rhomboids/levator scapula/etc)
- PRECAUTION: avoid impingement position
- Physical modalities per PT discretion

Weeks 8-12:

- If ROM lacking, increase to full with gentle passive stretching at end ranges
- Advance strengthening as tolerated: isometrics → bands → light weights (1-5 lbs); 8-12 reps/2-3 set per rotator cuff, deltoid, and scapular stabilizers

Months 3-12:

- Begin UE ergometer
- Begin eccentrically resisted motions, plyometrics (weighted ball toss), proprioception (ex body blade), and closed chain exercises at 12 wks
- Begin 90/90 ER exercises at 12 weeks
- Begin sports related rehab at 3 months, including advanced conditioning
- Return to throwing at 4 ½ months
- Throw from pitcher's mound at 6 months with MD approval
- MMI is usually at 12 months

Comments:

Teach HEP _____

Modalities PRN

Every patient's therapy progression will vary to a degree depending on many factors. Please use your best clinical judgment on advancing a patient. If other ideas are considered to improve patient's outcome do not hesitate to call.

Patient's recovery is a team approach: Patient, family/friend support, therapist, and surgeon. Every team member plays an important role in recovery.

Signature _____ **Date** _____