

# Central Texas

Sports Medicine & Orthopaedics, P.A.

## Arthroscopic SLAP Repair Physical Therapy Protocol

### Phase I – Immediate Postoperative Phase (Day 1 – Week 6)

- Goals:** Protect anatomic repair  
Prevent negative effects of immobilization  
Promote dynamic stability  
Diminish pain and inflammation

#### Week 0-2:

- Sling for 4 weeks
- Sleep in sling for 4 weeks
- Elbow/hand ROM
- Hand gripping exercises
- Passive and gently active assistive ROM exercise
- Flexion to 60 degrees (Week 2: Flexion to 75 degrees)
  - Elevation in scapular plane to 60 degrees
  - ER/IR with arm in scapular plane
  - ER TO 10-14 degrees
  - IR to 45 degrees\*\*NO active ER or Extension or Abduction
- Submaximal isometrics for shoulder musculature
- NO Isolated Biceps contractions
- Cryotherapy modalities

#### Week 3-4:

- Discontinue use of sling at 4 weeks
- Sleep in sling until week 4
- Continue gently ROM exercises (PROM and AAROM)
  - Flexion to 90 degrees
  - Abduction to 75-85 degrees
  - ER in scapular plane and 35° ABD to 25 -30 degrees
  - IR in scapular plane and 35° ABD to 55-60 degrees\*\*Note: Rate of progression based on evaluation of the patient
- No active ER, Extension or Elevation
- Initiate rhythmic stabilization drills
- Initiate Proprioception training
- Tubing ER/IR at 0 degrees Abduction
- Continue Isometrics
- Continue Cryotherapy

#### Week 5 -6:

- Gradually improve ROM
  - Flexion to 145 degrees
  - ER at 45 degrees abduction: 45-50 degrees
  - ER at 45 degrees abduction: 55-60 degrees
  - At 6 weeks begin light and gradual ER at 90° abduction – progress to 30-40° ER
- May initiate stretching exercises
- May initiate light (easy) ROM at 90 degrees Abduction
- Continue tubing ER/IR (arm at side)

### **Week 5-6: (con't)**

- PNF manual resistance
- Initiate Active Shoulder Abduction (without resistance)
- Initiate “Full Can” exercise (Weight of ARM)
- Initiate Prone Rowing, Prone Horizontal Abduction
- NO Biceps Strengthening

### **Phase II – Intermediate Phase: Moderate Protection Phase (Week 7 – 14)**

**Goals:** Gradually restore full ROM (week 10)  
Preserve the integrity of the surgical repair  
Restore muscular strength and balance

### **Week 7 – 9:**

- Gradually progress ROM:
  - Flexion to 180 degrees
  - ER at 90 degrees abduction: 90-95 degrees
  - IR at 90 degrees abduction: 70-75 degrees
- Continue to progress isotonic strengthening program
- Continue PNF strengthening
- Initiate Throwers Ten Program

### **Week 10 -12:**

- May initiate slightly more aggressive strengthening
- Progress ER to Throwers Motion
  - ER at 90 degrees abduction: 110-115 in throwers (Week 10-12)
- Progress isotonic strengthening exercises
- Progress ROM to functional demands (i.e overhead athlete)
- Continue all strengthening exercises

### **Phase III – Minimal Protection Phase (Week 14-20)**

**Goals:** Establish and maintain full ROM  
Improve muscular strength, power and endurance  
Gradually initiate functional activities

### **Criteria to enter Phase III:**

- 1. Full non-painful ROM**
- 2. Satisfactory stability**
- 3. Muscular strength (good grade or better)**
- 4. No pain or tenderness**

### **Week 14 – 16:**

- Continue all stretching exercises (capsular stretches)
- Maintain Throwers Motion (Especially ER)
- Continue strengthening exercises:
  - Throwers Ten Program or Fundamental Exercises
  - PNF Manual Resistance
  - Endurance training
  - Initiate light Plyometric program
  - Restricted sport activities (Light swimming, half golf swings)

### **Week 16 – 20: (con't)**

- Continue all exercise listed above

- Continue all stretching
- Continue Throwers Ten Program
- Continue Plyometric Program
- Initiate interval sport program (throwing, etc)  
\*\*See Interval Throwing Program

#### **Phase IV – Advanced Strengthening Phase (Week 20 – 26)**

**Goals:** Enhanced muscular strength, power and endurance  
Progress functional activities  
Maintain Shoulder mobility

##### **Criteria to enter Phase IV:**

1. Full non-painful ROM
2. Satisfactory static stability
3. Muscular strength 75-80% of contralateral side
4. No pain or tenderness

##### **Week 20 – 26:**

- Continue flexibility exercises
- Continue isotonic strengthening program
- PNF manual resistance patterns
- Plyometric strengthening
- Progress interval sport programs

#### **Phase V – Return to Activity Phase (Month 6 to 9)**

**Goals:** Gradual return to sport activities  
Maintain strength, mobility and stability

##### **Criteria to enter Phase V:**

1. Full functional ROM
2. Muscular performance isokinetic (fulfills criteria)
3. Satisfactory shoulder stability
4. No pain or tenderness

##### **Exercises:**

- **Gradually progress sport activities to unrestrictive participation**
- **Continue stretching and strengthening program**

#### **\*\*Posterior Labral Repairs**

- Protect Repair
- Phase II – get full IR posterior capsule mobility
- Rotator Cuff Strengthening

Please note that rehabilitation protocols are to be used as general guidelines in the overall treatment and plan of care for the patients of Central Texas Sports Medicine & Orthopaedics. Supervised treatment and care under physicians, physical therapists, and athletic trainers are essential in a patient progressing through each phase of the rehabilitation process. Our doctors, therapists, and trainers will determine the appropriate progression of the specific protocol for each patient.