

SLAP Lesion Repair Rehabilitation Protocol

This rehabilitation protocol has been developed for the patient following a SLAP (Superior Labrum Anterior Posterior) repair. It is extremely important to protect the biceps/labral complex for 6 weeks post-operatively to allow appropriate healing. This protocol has been divided into phases. Each phase may vary slightly based on the individual patient and special circumstances. The **overall goals** of the surgical procedure and rehabilitation are to:

- Control pain and inflammation
- Regain normal upper extremity strength and endurance
- Regain normal shoulder range of motion
- Achieve the level of function based on the orthopedic and patient goals

Early passive range of motion with noted limitations is highly beneficial to enhance circulation within the joint to promote healing. The physical therapy should be initiated within the first week following surgery. The supervised rehabilitation program is to be supplemented by a home fitness program where the patient performs the given exercises at home or at a gym facility.

Important post-operative signs to monitor include:

- Swelling of the shoulder and surrounding soft tissue
- Abnormal pain response, hypersensitive-an increase in night pain
- Severe range of motion limitations
- Weakness in the upper extremity musculature

Return to activity requires both time and clinical evaluation. To safely and most efficiently return to normal or high level functional activity, the patient requires adequate strength, flexibility, and endurance. Functional evaluation including strength and range of motion testing is one method of evaluating a patient's readiness to return to activity. Return to intense activities following a SLAP repair requires both a strenuous strengthening and range of motion program along with a period of time to allow for tissue healing. Symptoms such as pain, swelling, or instability should be closely monitored by the patient.

Phase 1: Week 0-3

WEEK		EXERCISE	GOAL
0-3	ROM	Passive range of motion Flexion/Elevation	Gradual ↑ 0-60° wk 1 0-75° wk 2 0-90° wk 3
		Passive range of motion-scapular plane External Rotation	0-15° wk 1 0-30° wk 2-3
		Internal Rotation	as tolerated
		Pendulum exercises Rope/Pulley (flex, abd, scaption) Wand exercises-all planes within limitations Posterior capsule stretch Manual stretching and Grade I-II joint mobs	
	STRENGTH	Initiate submaximal isometrics-NO elbow flexion Initiate scapular stabilizer strengthening Initiate UBE without resistance	
	BRACE	Brace for 4 weeks or as noted by Dr. Fullick Brace removed for exercises above	
	MODALITIES	E-stim as needed Ice 15-20 minutes	

GOALS OF PHASE:

- Promote healing of tissue
- Control pain and inflammation
- Gradual increase in ROM
- Independent in HEP
- Initiate muscle contraction

Phase 2: Week 3-6

WEEK		EXERCISE	GOAL
3-6	ROM	Passive range of motion Flexion/Elevation	Gradual ↑ 0-145°
		Passive range of motion-scapular plane External Rotation	0-50° wk 6
		Internal Rotation	Full ROM wk 6
		Pendulum exercise Posterior capsule stretch	

Rope/Pulley (flex, abd, scaption)
 Wand exercise-all planes within limitations
 Manual stretching and Grade II-III to reach goals

STRENGTH

Continue isometric activities as in Phase 1
 Initiate supine rhythmic stabilization at 90° flexion
 Initiate IR/ER at neutral with tubing
 Initiate forward flexion, scaption, empty can
 Initiate sidelying ER and tricep strengthening
 Push-up progression
 Prone abduction with external rotation
 Shoulder shrugs with resistance
 Supine punches with resistance
 Shoulder retraction with resistance
 Initiate UBE for endurance
 Prone rows
 Initiate **light** biceps curls at week 3

MODALITIES

Ice 15-20 minutes

GOALS OF PHASE:

- Control pain and inflammation
- Enhance upper extremity strength
- Gradual increase in ROM

Phase 3: Week 6-12

WEEK	ROM	EXERCISE	GOAL
6-12		Continue all ROM activities from Phase 2 Posterior capsule stretching Towel stretching Rope/Pulley activities Wand exercises Manual stretching and Grade III-IV mobs	Full ROM 10-12 wks
		STRENGTH Continue all strengthening from previous phases increasing resistance and repetition Initiate plyotoss chest pass Initiate PNF patterns with Thera band Initiate IR/ER exercises at 90° abduction Initiate isokinetic IR/ER at neutral at wk 10-12	
		MODALITIES Ice 15-20 minutes	

GOALS OF PHASE:

- Minimize pain and swelling

- Reach full ROM
- Improve upper extremity strength and endurance
- Enhance neuromuscular control
- Normalize arthrokinematics

Phase 4: Week 12-24

WEEK

12-24

EXERCISE

ROM

Continue with all ROM activities from previous phases
 Posterior capsule stretching
 Towel stretching
 Grade III-IV joint mobs as needed for full ROM

STRENGTH

Progress strengthening program with increase in resistance and high speed repetition
 Progress with eccentric strengthening of posterior cuff and scapular musculature
 Initiate single arm plyotoss
 Progress rhythmic stabilization activities to include standing PNF patterns with tubing
 UBE for strength and endurance
 Initiate military press, bench press, lat pulldown
 Initiate sport specific drills and functional activities
 Initiate interval throwing program week 16
 Initiate light plyometric program week 12-16
 Progress isokinetics to 90° of abduction at high speeds

MODALITIES

Ice 15-20 minutes

GOALS OF PHASE:

- Full ROM
- Maximize upper extremity strength and endurance
- Maximize neuromuscular control
- Initiate sports specific training/functional training

Patient should complete stretching exercises 3x a day

May return to weight room at 3 months if appropriate.

May return to contact sports by 6 months if appropriate.