

## Postoperative Protocols - SLAP Repair

### EARLY PHASE - PROTECTIVE (0 - 4 WEEKS)

#### GOALS

- Protect repair
  - Education patient on procedure and therapeutic progression
  - Regulate pain and control inflammation
  - Initiate ROM and dynamic stabilization
  - Neuromuscular re-education of external rotators and scapulothoracic muscles
- 

### 0 - 2 WEEKS

- Sling x 3 weeks
  - Gripping exercises
  - Elbow/wrist/hand ROM
  - Peldulums
  - PROM to AAROM
  - IR/ER proprioception training
  - Initiate gentle alternating isometrics for IR/ER in 0 deg scapular position
  - Initiate passive flexion 90
  - Initiate scapular mobility
- 

### 2 - 4 WEEKS

- Progress ROM: flexion to 120, ER 35 deg (scapular plane), IR 60 (scap plane)
- Progress sub-maximal alternating isometrics for IR/ER in scap plane
- Initiate scap strengthening, manual retraction, resisted band retraction
- Deltoid isometrics (ant/middle/post)
- Biceps/triceps strengthening
- Initiate light bandwork for ER/IR

### **INTERMEDIATE PHASE (WEEKS 5 - 8)**

**GOALS - NORMALIZE ARTHROKINEMATICS, GAIN NEUROMUSCULAR CONTROL, NORMALIZE POSTERIOR SHOULDER FLEXIBILITY**

#### **TREATMENT PLAN**

- ROM progression: flexion to max, ER 65 (scap plane), full IR
- Initiate joint mobs, if necessary
- Initiate posterior capsular stretching
- Progress strengthening (IR/ER band scap plane, side lying ER, scaption full can, CW/CCW ball against wall, bony blade @neutral or rhythmic stabilization)

#### **MILESTONES FOR PROGRESSION**

- Flexion to 160
  - ER to 65 (scapular plane)
  - Full IR
  - Symmetric posterior capsule mobility
  - Progress isotonic strength with IR/ER in available range
- 

### **STRENGTHENING PHASE (9 - 14 WEEKS)**

**GOALS - NORMALIZE ROM, PROGRESSION OF STRENGTH, NORMALIZE ST MOTION & STRENGTH, OVERHEAD ACTIVITY WITHOUT PAIN**

#### **TREATMENT PLAN**

- ROM Progression: stretching ER @ 90deg abduction, within 10 deg normal ROM in all planes;
- progression of scap retractors and stabilizers (prone program LT/MT/Rhmd), LT; scapular depression
- Progress strengthening - challenging rhythmic stabilization, UBE, Initiate isokinetic IR/ER in scapular pain, Initiate IR/ER @ 90 deg abduction, closed kinetic chain exercise

#### **MILESTONES FOR PROGRESSION**

- Within 10 degrees of full AROM in all planes
- Isometric strength IR/ER <50 % deficit
- <30% strength deficits, primary shoulder muscles and scap stabilizers



### **ADVANCED STRENGTHENING PHASE (15 - 24 WEEKS)**

**GOALS - PAIN FREE FULL ROM, IMPROVE UE ENDURANCE, IMPROVE DYNAMIC STABILITY**

#### **TREATMENT PLAN**

- Maintain flexibility
- Progress strengthening - advance CKC, wall push-ups with/without ball, continue w/ overhead strengthening, continue with ISOK IR/ER strengthening @ 90 deg abduction, advance ISOT strengthening, advance rhythmic stabilization training in various ranges and positions
- Initiate plyometric strengthening, (chest passes, trunk twists, overhead passes, 90/90 single arm plyo)

**C. MILESTONES FOR PROGRESSION - FULL PAIN FREE ROM, STRENGTH DEFICITS <20% FOR IR/ER @ 90DEG, <20% THROUGHOUT**

---

### **RETURN TO SPORT ( 4 - 6 MONTHS)**

**GOALS - PAIN FREE FULL ROM, NORMALIZED STRENGTH, RETURN TO SPORT/ACTIVITY PROGRAM**

#### **TREATMENT PLAN**

- Continue ISOK training, continue w/ stability training, advanced plyo training, continue with CKC

**MILESTONES: CONFIDENCE IN SHOULDER, STRENGTH DEFICITS <10%, FULL PAIN FREE ROM, COMPLETION OF RETURN TO SPORT PROGRAM**