



ORTHOPEDIC ASSOCIATES OF LANCASTER, LTD

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Shoulder & Elbow Surgery

REHABILITATION PROTOCOL: SLAP REPAIR

Phase I: Protect repair, restore ROM (0 to 6 weeks)

- May remove dressing and shower postop day # 3.
- Sutures are all underneath the skin and will dissolve on their own.
- Ice or cold flow systems encouraged for the first week at a minimum: should be used 3-4 times per day.
- Sling should be in place when not performing exercises.
- Scapular ROM exercises.
- No lifting with involved extremity.
- Avoid pure active shoulder exercises, resisted biceps exercises.
- Avoid shoulder rotation ROM from abducted position and cross body motions.
- Initiate exercise program 3 times per day:
 - Immediate elbow, forearm and hand range of motion out of sling
 - Pendulum exercises
 - Passive and active assistive ROM – flexion and scapular plane elevation to tolerance, ER to 45 (pulleys, supine gravity assisted exercises)
 - Emphasize home program

PHASE II: Advance ROM (6 to 12 weeks)

- May discontinue sling.
- Lifting restriction of 10 pounds should be reinforced with patient until 3 months.
- Advance to AROM exercises.
- Advance PROM and capsular mobility as tolerated.
- Avoid rotational ROM in abducted position until 8 weeks postop.
- Initiate rotator cuff and gentle biceps strengthening (up to 10 lbs).

Phase III: Restore function (> 3 months)

- Discontinue lifting restriction.
- Advance to higher level rotator cuff and scapular stabilizer strengthening.



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- Start throwing progression if applicable.