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Rehabilitation Protocol: Arthroscopic SLAP Repair

Nai	ne: Date:
Dia	gnosis: Date of Surgery:
F	Phase I (Weeks 0-4)
	 Sling immobilization at all times except for showering and rehab under guidance of PT Range of Motion –AAROM → AROM as tolerated Restrict motion to 140° of Forward Flexion, 40° of External Rotation and Internal Rotation to stomach No Internal Rotation up the back/No External Rotation behind the head Therapeutic Exercise Wrist/Hand Range of Motion Grip Strengthening Isometric Abduction, Internal/External Rotation exercises with elbow at side No resisted Forward Flexion/Elbow Flexion (to avoid stressing the biceps origin) Heat/Ice before and after PT sessions
	Phase II (Weeks 4-6)
	 Discontinue sling immobilization Range of Motion – Increase Forward Flexion, Internal/External Rotation to full motion as tolerated Therapeutic Exercise Advance isometrics from Phase I to use of a theraband within AROM limitations Continue with Wrist/Hand Range of Motion and Grip Strengthening Begin Prone Extensions and Scapular Stabilizing Exercises (traps/rhomboids/levator scapula) Gentle joint mobilization Modalities per PT discretion
	 Phase III (Weeks 6-12) Range of Motion – Progress to full AROM without discomfort Therapeutic Exercise – Advance theraband exercises to light weights (1-5 lbs) 8-12 repetitions/2-3 sets for Rotator Cuff, Deltoid and Scapular Stabilizers Continue and progress with Phase II exercises Begin UE ergometer Modalities per PT discretion
	Phase IV (Months 3-6)
	 Range of Motion – Full without discomfort Therapeutic Exercise – Advance exercises in Phase III (strengthening 3x per week) Sport/Work specific rehabilitation Return to throwing at 4.5 months Return to sports at 6 months if approved Modalities per PT discretion
Fre	nments: equency: times per week