

SLAP LESION REPAIR PROTOCOL

Dr. Steven Flores

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.

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Phase 1: Week 0-3
SLAP Repair

WEEK	EXERCISE	GOAL
0-3	ROM Passive range of motion Flexion/Elevation Passive range of motion-scapular plane External Rotation Internal Rotation Pendulum exercises Rope/Pulley (flex, abd, scaption) Wand exercises-all planes within limitations Posterior capsule stretch Manual stretching and Grade I-II joint mobs	Gradual ↑ 0-60° wk 1 0-75° wk 2 0-90° wk 3 0-15° wk 1 0-30° wk 2-3 as tolerated
	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. Flores 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
SLAP Repair**

WEEK	EXERCISE	GOAL
3-6	<p>ROM</p> <p>Passive range of motion Flexion/Elevation</p> <p>Passive range of motion-scapular plane External Rotation Internal Rotation</p> <p>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</p> <p>STRENGTH</p> <p>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</p> <p>MODALITIES</p> <p>Ice 15-20 minutes</p>	<p>Gradual ↑</p> <p>0-145°</p> <p>0-50° wk 6 Full ROM wk 6</p>

GOALS OF PHASE:

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

Phase 3: Week 6-12
SLAP Repair

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

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
SLAP Repair

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.