

Arthroscopic Type II SLAP Repair Rehabilitation Protocol

Phase I

Goals

- Protect the anatomic repair
- Prevent negative effects of immobilization
- Promote dynamic stability
- Diminish pain and inflammation

Day 1 to Week 2

- Sling and abduction pillow for four weeks (may remove for bathing and exercises)
- Elbow/hand passive range of motion
- Hand-gripping exercises (putty or ball)
- Passive and gentle shoulder active assertive range of motion exercises
 - Flexion to 60 degrees (week two: flexion to 75 degrees)
 - Elevation in scapular plane to 60 degrees
 - External rotation/internal rotation with arm in scapular plane
 - External rotation to 10 to 15 degrees
 - Internal rotation to 45 degrees

Note: No active External rotation or extension or abduction

- Submaximal isometrics for shoulder musculature
- No isolated biceps contractions
- Cryotherapy, modalities as indicated

Week 3 to 4

- Discontinue use of abduction pillow at four weeks
- Wean out of sling between week four to six
- Continue gentle range of motion exercises (passive range of motion and active assertive range of motion)
 - Upper body exercise
 - Flexion to 90 degrees
 - Abduction to 75 to 85 degrees
 - External rotation in scapular plane to 25 to 30 degrees
 - Internal rotation in scapular plane to 55 to 60 degrees

Note: Rate of progression based on elevation of the patient

- Initiate rhythmic stabilization drills
- Initiate proprioception training
- Continue isometrics
- Continue use of cryotherapy

Note: No active external rotation, extension or elevation

Weeks 5 to 6

- Should be out of sling completely by week six
- Gradually improve range of motion
 - Flexion to 145 degrees
 - External rotation at 45 degrees abduction to 45 to 50 degrees
 - Internal rotation at 45 degrees abduction to 55 to 60 degrees
- May initiate stretching exercises
- May initiate light (easy) range of motion at 90 degrees abduction
- Continue tubing external rotation/internal rotation (with towel roll)
- Proprioceptive neuromuscular facilitation manual resistance
- Initiate active shoulder abduction (without resistance)
- Initiate “full can” exercise (weight of arm)
- Initiate rowing, horizontal abduction – all prone
- No biceps strengthening
- Tubing external rotation/internal rotation with towel roll under arm for some slight abduction

Phase II

Goals

- Gradually restore full range of motion (week 10)
- Preserve the integrity of the surgical repair
- Restore muscular strength and balance

Weeks 7 to 9

- Gradually progress range of motion
 - Flexion to 180 degrees
 - External rotation at 90 degrees abduction to 90 to 95 degrees
 - Internal rotation at 90 degrees abduction to 70 to 75 degrees
- Continue to progress isotonic strengthening program
- Continue proprioceptive neuromuscular facilitation strengthening
- Initiate thrower’s 10 program
- May begin active range of motion biceps

Weeks 10 to 12

- May initiate slightly more aggressive strengthening
- Progress external rotation to thrower motion
 - External rotation/internal rotation at 90 degrees abduction to 110 to 115 degrees in throwers
- Progress isotonic strengthening exercises
- Continue all stretching and strengthening exercises
 - Progress range of motion to functional demands (i.e., overhead athlete)

Phase III

Criteria to Enter Phase III

- Full nonpainful active range of motion
- Satisfactory stability
- Muscular strength (good grade or better)
- No pain or tenderness

Goals

- Establish and maintain full passive range of motion and active range of motion
- Improve muscular strength, power and endurance
- Gradually initiate functional activities

Weeks 12 to 16

- Maintain throwers motion (especially external rotation)
- May begin resisted biceps and forearm supination exercises
- Continue strengthening and stretching exercises
 - Throwers 10 program or fundamental exercises
 - PNF manual resistance
 - Endurance training
 - Initiate light plyometric program
 - Restricted sports activities (light swimming, half golf swing)

Weeks 16 to 20

- Continue all exercises listed above
- Continue all stretching
- Continue throwers 10 program
- Continue plyometric program
- Initiate interval sport program (throwing, etc.)

Phase IV

Criteria to Enter Phase IV

- Full nonpainful active range of motion
- Satisfactory static stability
- Muscular strength 75 to 80 percent of contralateral side
- No pain or tenderness

Goals

- Enhance muscular strength, power and endurance
- Progress functional activities
- Maintain shoulder mobility

Weeks 20 to 26

- Continue flexibility exercises
- Continue isotonic strengthening programs
- PNF manual-resistance patterns
- Plyometric strengthening
- Progress to interval sport programs

Phase V

Criteria to Enter Phase V

- Full functional range of motion
- Muscular performance isokinetic (fulfills criteria)
- Satisfactory shoulder stability
- No pain or tenderness

Goals

- Gradual return to sport activities
- Maintain strength, mobility and stability

Exercises

- Gradually progress sport activities to unrestricted participation
- Continue stretching and strengthening program

Helping you achieve
the optimal activity
level for your lifestyle
is my first priority.

- Scott Gudeman, MD



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