

ARTHROSCOPIC SLAP REPAIR (Type II & Type IV) REHABILITATION PROTOCOL

* No Isolated Biceps x 8 weeks

*No compressive forces x 8 weeks

Phase I: Protection Phase/Immediate Motion (0 – 6 Weeks post-op)

Goals:

- Maintain integrity of repair
- Gradual return of PROM/AAROM
- Increase shoulder strength while respecting repair
- Decrease pain and inflammation

Weeks 0 - 3

- Sling for protection for 4 weeks except for completing prescribed exercises. Sleep in immobilizer for 4 weeks.
- Elbow/hand/wrist/scapulothoracic AROM exercises
- Hand gripping exercises
- PROM: week 1 Flexion to 60°, week 2 Flexion to 75°, ER to 15° in scapular plane, IR to 45° in scapular plane
- AROM: None
- Strengthening:
 - Isometrics for shoulder/scapular muscles except biceps
 - No isolated biceps contractions
- Pain control modalities as indicated

Weeks 3 – 4:

- Pendulum start 3 weeks post-op unless otherwise specified
- PROM Flexion to 90°, ER to 25-30° in scapular plane, IR to 55-60° in scapular plane
- AAROM Wand ER to 30° in scapular plane
- Continue isometric shoulder/scapular muscle strengthening except biceps
- Pain control modalities as indicated

Weeks 4 - 6

- PROM/AAROM:
 - Flexion to 145°
 - ER to 50° in scapular plane
 - IR to 55-60° in scapular plane
- Strengthening:
 - Initiate tubing IR/ER with arm at side (limit ER to 30°)
 - Initiate rhythmic stabilization exercises
- Continue pain/inflammation control modalities PRN

Phase II – Intermediate Phase (6 – 12 Weeks post-op)

Goals:

- Restoration of full, pain-free ROM by week 10
- Protect surgical repair
- Restore muscular strength/endurance

Week 6 – 10

- Initiation of upper extremity cycle at 6 weeks post-op. No resistance.
- AROM to 90 degrees with appropriate scapulothoracic/glenohumeral motion.
- PROM/AAROM: progress to full ROM by week 10
 - Flexion to 180 degrees
 - ER to 90° at 90° abduction (Do not push motion beyond 90° of ER @ 90° Abd.)
 - IR to tolerance at 90° abduction
- Strengthening: avoid scapular hiking/winging, stay below horizontal plane
 - IR/ER @ modified neutral with tubing
 - Initiate Isotonic dumbbell exercises: *patient must be able to elevate arm without scapular hiking before initiating isotonic: if unable then continue with humeral head stabilizing exercises.* Progress 1 pound/wk with max of 5 pounds based on progress.
 - flexion to 90°
 - scaption to 90°
 - flexion/horizontal abduction (“T’s”): limit hor. abd. to scapular plane
 - scapulothoracic muscles
 - elbow flexion AROM biceps may begin at 6 weeks post-op. Add 1 pound/wk starting at 8 weeks post-op
 - elbow extension strengthening
 - Initiate isokinetic strengthening in neutral (high speed/high reps) at 8 weeks post-op
- Initiate capsular stretches at 8 weeks post-op. Emphasize sidelying posterior capsule stretching if indicated. Do not start sidelying posterior capsule stretching before 8 weeks post-op to protect the repair.

Weeks 10 – 12:

- Continue ROM, flexibility and self-capsular stretches
- Strengthening:
 - Continue dumbbell and scapular strengthening
 - Continue IR/ER strengthening
 - Initiate close chain strengthening (serratus CKC plus progression)
- Initiate 2 handed plyometrics (chest pass/chops)
- Isokinetic IR/ER testing at 60 deg/sec and 180 deg/sec at 12 weeks post-op

Phase III – Return to Activity Phase (12 – 24 weeks post-op)

Goals:

- Maintain full ROM
- Improve muscular power
- Increase neuromuscular control
- Gradual return to sport specific activities

Weeks 12 – 16:

- Continue all flexibility exercises:
- Strengthening:
 - Continue shoulder/scapular isotonics and closed chain program
 - Isokinetics (progress to 90/90 for throwers)
 - Begin general strengthening (bench, lats, etc) with shoulder precautions
- Progress plyometrics (2 handed chest pass ->2 handed chops -> 1 handed 90/90)
- Initiate interval sport program (light sports – no overhead activities)

Weeks 16 – 24:

- Continue flexibility/ROM/stretching program
- Continue strengthening program
- Continue plyometric program
- Begin overhead interval sport programs (throwing)

Phase IV – Return to Competition Phase (24-36 week post-op)**Goals:**

- Maintain strength, mobility and stability
- Progress to full activity and competition

Criteria for return to play:

- Physician approval
- Satisfactory ROM
- Satisfactory strength test
- Satisfactory clinical exam
- Satisfactory completion of interval sport program

