

PHYSICAL THERAPY PROTOCOL/PRESCRIPTION: SLAP Repair

Name: _____

Date of Surgery: _____

Diagnosis: _____

Signed: _____

Frequency: 2-3 times per week x 12 weeks

Week 0-1: Patient will do home exercises given post-op (pendulums, elbow and wrist ROM etc.)

Phase 1 → 1-4 weeks post-opSling:

- Sling use for 2 weeks at all times day and night, after 2 weeks sling during day only

Range of Motion/Goals:

- No internal rotation up the back
- External rotation goal: 20 degrees at side, no external rotation behind the head
- Passive forward flexion goal: 90 degrees
 - o No resisted FF or elbow flexion for 6 weeks, do not stress biceps root

Heat before and Ice after PT sessions

Phase 2 → 4-8 weeks post-opSling:

- May d/c sling

Range of Motion/Goals:

- AROM: forward flexion: 140 degrees; External rotation at side: 40 degrees; Abduction: 60 degrees; Internal rotation: behind back at waist level

Exercises:

- Begin light isometrics and light bands within AROM limitations as above
- Begin scapular stabilization as tolerated (traps/rhomboids etc.)
- Physical modalities per PT discretion

Phase 3 → 8-12 weeks post-opRange of motion:

- If deficient in ROM → increase to full with gentle PROM stretching at end ranges

Exercises:

- Advance strengthening as tolerated: isometrics → bands → weights (1-5lbs) for 8-12reps/2-3 sets per rotator cuff, deltoid, and scapular stabilizers

Final Phase → 3month-12months pos-op

- Begin sports related rehab and advanced conditioning at 3 months
- Begin upper extremity ergometer
- Strengthening limited to 3x per week to prevent cuff tendonitis
- Begin eccentrically resisted motions, plyometrics (weighted ball toss, etc.), proprioception (body blade, etc.), and closed chain exercises at 12 weeks
- Return to throwing at 4.5 months, pitching at 6 months