

SLAP Repair Protocol David E. Hartigan, M.D.

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Patient Name		Date of Surgery
Procedure: ☐ Right ☐ Left Shoulder SLAP Repair		
☐ Evaluate and Treat	\square Provide patient with home	program
Frequency:x/week x	weeks	
 □ Phase I (0-4 wks): Period of protection: In general, sling should be worn at all times during this phase (except for hygiene and PT). Motion and strengthening exercises are performed within strict motion limits. ■ Weeks 0-1: No formal PT. ○ Sling at all times (except for hygiene and pendulums). ○ Home exercises only (pendulums, elbow + wrist ROM, grip strengthening). ■ Weeks 1-4: Begin formal PT (2-3 x/wk). ○ Sling at all times (except for hygiene and PT). ○ ROM: Restrict motion to 90 deg FF / 20 deg ER at side / IR to stomach / 45 deg abduction. No IR up the back or ER behind head. Forward flexion should not be combined with cross-body adduction. - Progress PROM g AAROM g AROM as tolerated within the above limits - Heat before, ice after. ○ Strengthening: Cuff/periscapular/deltoid isometrics in sling, within above motion limits. No resisted forward flexion or elbow flexion (biceps) until 6 weeks post-op to protect the biceps root. 		
 Phase II (4-8 wks): Progress to active motion and protected strengthening. D/C sling if cleared by MD ROM: Progress AROM to 140 deg FF / 40 deg ER with arm at side / 60 deg ABD/IR behind back to waist. Strengthening: Progress cuff/deltoid and periscapular strengthening (isometrics/light bands) within above motion limits. Do not begin light bands for forward flexion or elbow flexion until after 6 wks. Modalities as per PT discretion 		
 □ Phase III (8-12 wks): Advance ROM and more aggressive strengthening. • ROM: Advance active and passive ROM to full with gentle passive stretching at end ranges. Progress to aggressive passive stretching after 10 wks if not at full motion. • o Goal: full ROM by 3 months. • Strengthening: Advance as tolerated from isometrics g bands g light weights (1-5lbs) w/8-12 reps x 2-3 sets for cuff, deltoid, scapular stabilizers (Only do this 3x/wk to avoid cuff tendonitis) 		
 Phase IV (3-12 months): Progress to sport/occupation-specific rehab. ROM: Aggressive passive stretching at end ranges if full motion not yet achieved. Strengthening/Activities: Continue bands/light weights as above, 3x/wk. Begin eccentrically resisted motions, plyometrics (weighted ball toss), proprioception (body blade) and closed-chain strengthening. Throwing: At 4.5 months - if full-strength – can return to light tossing At 6 months, throw from the pitcher's mound and/or return to collision sports (hockey, football, etc.) Work: Ove 		
By signing this referral, I certify that I have examined this patient and physical therapy is medically necessary. This patientwouldwould not benefit from social services.		
Physician Signature		Date
Printed Name		<u>I</u>