REHABILITATION GUIDELINES AFTER ARTHROSCOPIC SLAP REPAIR



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The intent of this protocol is to provide the therapist with guidelines of the post-operative rehabilitation course after an arthroscopic SLAP repair. It should not be a substitute for one's clinical decision making regarding the progression of a patient's post-operative course based on their physical exam findings, individual progress, and/or the presence of post-operative complications. The therapist should consult the referring physician with any questions or concerns.

FREQUENCY: Weeks 0-4: 3x/week. Weeks 4-12: 2x/week. Weeks 12-16: 1x/week. Weeks 16-24: 1x/2 weeks.

PHASE I (0-6 weeks)

Goals

• Control inflammation and pain

INDIVIDUAL CONSIDERATIONS:

• Use cryocuff 3-4 times per day

• Start PROM

Sling

• Wear sling continuously (except for therapy and showering) for 4 weeks

Therapeutic Exercises

- PROM of elbow and wrist
- Ball squeezes
- PROM of shoulder
 - o 90 degrees forward flexion in scapular plane
 - o 0 degrees of external rotation
 - o IR to posterior belt line

PHASE II (6-8 weeks)

Criteria

• 90 degrees of passive forward flexion

Goals

- Full, painless PROM/AROM in forward flexion and internal rotation
- 30 degrees of external rotation

Sling

- Use sling for 4 weeks continuously except for shower and therapy
- May discontinue at 4-6 weeks

Therapeutic Exercises

- Continue to increase PROM and begin AROM to achieve
 - o Full forward flexion
 - o External rotation at the side to 30 degrees maximum
 - o Full internal rotation

PHASE III (8-12 weeks)

Criteria

Full passive internal rotation and forward flexion

Goals

- External rotation to 45 degrees
- AROM to PROM parameters

Therapeutic Exercise

- PROM/AROM
 - Full forward flexion
 - Full internal rotation
 - o 45 degrees of external rotation
- Begin posterior capsular stretching
 - o Cross arm stretch
 - Side lying internal rotation
- Increase active/passive external rotation at the side to full by 8 weeks
- Initiate strengthening program (avoid elbow resistive exercises until 3 months post-op)
 - o Initiate IR/ER at neutral with tubing
 - o Initiate forward flexion, scaption, empty can
 - o Initiate sideling ER and triceps strengthening
 - o Prone abduction with external rotation
 - Shoulder shrugs with resistance
 - Shoulder retraction with resistance
 - o Prone rows
 - o May begin internal and external rotation in the 90/90 position

PHASE V (3-6 months)

Criteria

• Full, painless PROM and AROM in all planes

Goals

- Maintain full PROM and AROM
- Progress with strengthening
- Return to functional activities at 3 months
- Return to overhead sports and contact activities at 6 months

Therapeutic Exercises

• Continue with passive stretching as needed to maintain full PROM

- Progress with strengthening, increasing resistance and repetition
- May initiate bench press, military press, and lat pull-downs
- Initiate and advance light biceps strengthening
- Initiate light plyometric drills at 12-16 weeks
- Initiate a throwing program at 16-20 weeks
- Sports specific drills can start at 16-20 weeks

Return to Sports

- May return to sports at 6 months when ROM is symmetric and painless
- Strength is 90% of contra-lateral side