



## POST OPERATIVE REHABILITATION PROTOCOL FOR TYPE 2 AND 4 SLAP REPAIR – DR. MEYER

### WEEKS 0-6

#### GOALS:

- Protect surgical repair.
- Prevent negative effects of immobilization
- Promote dynamic stability
- Diminish pain and inflammation

### WEEKS 0-2

- Sling for the first 4 weeks should be worn day and night.
- Elbow, wrist and hand ROM
- Hand gripping exercises
- Supine PROM and AAROM
  - Week 1 forward elevation to 75 degrees
  - Week 2 forward elevation to 90 degrees
  - Abduction in scapular plane to 60 degrees
  - ER and IR performed with arm in scapular plane.
  - ER to 10-15 degrees
  - IR to 45 degrees.
- NO ACTIVE ER, EXTENSION OR ABDUCTION
- NO ISOLATED BICEP CONTRACTIONS.
- Submax isometrics for shoulder musculature
- Cryotherapy as needed.

### WEEKS 3-4

- Discontinue sling use at 4 wks post-op
- Continue supine PROM and AAROM program with gradual transition into upright program to patient's tolerance.
  - Forward elevation to 120
  - Abduction scapular plane to 75
  - ER in scapular plane to 25-30 degrees
  - IR in scapular plane to 55-60
  - NO ACTIVE ER, EXTENSION OR ABDUCTION
  - NO ISOLATED BICEP CONTRACTIONS.
- Continue isometrics
- Continue cryotherapy.

#### WEEKS 5-6

- Gradually improve ROM with goals of:
- forward elevation to 145-150
- ER at 45 degrees of abduction to 45-50 degrees
- IR at 45 degrees of abduction to 55-60 degrees
- May initiate stretching exercises.
- Initiate active shoulder abduction without resistance
- Initiate prone rowing and prone horizontal abduction
- NO BICEP STRENGTHENING.

#### WEEKS 7-9

- gradually progress ROM with goals of:
- forward elevation to 180 degrees
- ER at 90 degrees of abduction to 90 degrees
- IR at 90 degrees of abduction to 70-75 degrees
- Continue to progress isotonic strengthening program

#### WEEKS 10-12

- COMMENCE LIGHT BICEP STRENGTHENING
- may initiate slightly more aggressive strengthening
- progress ER to thrower's motion when applicable
- progress isotonic strengthening program
- Continue all stretching exercises.
- Progress ROM to functional demands with goal of full ROM
- Continue all strengthening demands.

#### Criteria to progress:

- full non painful ROM
- satisfactory stability
- no pain or tenderness

#### WEEKS 14-16

- Continue all stretching exercises (capsular stretches)
- Continue strengthening exercises
- Endurance training
- Initiate light plyometric program
- Restricted sport activities (light swimming and half golf swings)
- Maintain thrower's motion where applicable.



#### WEEKS 16-20

- initiate interval sport program (ie throwing) as per interval return to specific sport program

#### Criteria for progressing:

- full non painful ROM
- satisfactory static stability
- Muscular strength 75% of contralateral side.
- No pain or tenderness.

#### ADVANCED STRENGTHENING:

#### GOALS:

- enhanced muscular strength, power and endurance
- progress functional activities
- Maintain shoulder mobility.

#### WEEKS 20-26

- continue with above stretching, strengthening and plyometrics.
- Progress interval sport program.

#### MONTHS 6 – 9

- Gradual return to sport.

This protocol provides the rehabilitation specialist with general guidelines for the rehabilitation of the patient undergoing a type 2 or 4 SLAP repair.

Questions regarding the progress of any patient are encouraged and should be directed to 952 442-8201 or [rehabprotocols@tcomn.com](mailto:rehabprotocols@tcomn.com)