

## **Postoperative Rehabilitation SLAP Repair**

### **Phase I: 0-6 Weeks**

#### **Goals:**

1. MAXIMUM protection of Biceps Tendon.
2. Minimize postoperative pain and swelling.
3. Facilitate full passive range of motion of non-surgical tissue.
4. Maintain muscle activity of all non-surgical tissue.
5. Independent with Home Exercise Program.

#### **Immobilization:**

1. In sling for 3-4 weeks at all times except for hygiene and therapeutic exercises. Then may wean out as tolerates.

#### **ROM:**

1. Flexion/Elevation 0-60 degrees week 1  
0-90 degrees week 2  
0-120 degrees week 3  
0-160 degrees week 4
2. External rotation limited to:  
0-15 degrees at neutral abduction week 1  
0-30 degrees at neutral abduction week 2  
0-45 degrees at 45 degrees abduction week 4  
0-60 degrees at 60 degrees abduction week 6
3. Internal rotation increases at tolerated

#### **Modalities:**

1. Cryotherapy.
2. Pain modification.

#### **Exercises:**

1. Wrist and hand active ROM, overhead pulleys, table slides and pendulum for PROM.
2. Clinician directed PROM per guidelines above. Grade I-II joint mobs as indicated.
3. Submaximal isometrics at week 2 from neutral (progress intensity as tolerated)
4. May begin AAROM (wand of T-bar) and PRE's from neutral at week 3 pending tolerance.
5. Begin scapular stabilization (start in sidelying progressing to prone) at week 2-3.

ROM:

1. All should be full or aggressively pursuing at this time.

Exercises:

1. Emphasize progression of PRE's and TAS program.
  - a. Begin throwing program and/or overhead functional activities when internal rotation/external rotation strength at desired Tq/BW goals.
2. Progress eccentric strengthening and high speed receptions.
3. Ease back into proper upper extremity weight lifting in gym if appropriate.

Strength Testing:

1. Continue testing monthly until goals met.

Return to Sport/Function:

1. Strength goals met.
2. Pain free.
3. Throwing program, Functional Progression and/or Work/Hardening completed.